

CHEMIST & DRUGGIST

The newsweekly for pharmacy

September 4, 1993

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PAIN DISAPPEAR
FAST.**

DEEP HEAT

Mentholatum

MAXIMUM STRENGTH

Penetrating relief from rheumatic pain,
fibrositis, lumbago, and sciatica

MAXIMUM

**AND PROFITS
APPEAR EVEN
FASTER.**

We've never produced a stronger localised pain reliever than this. It's the new addition to our Deep Heat range. And never before have we given such strong support to a new product launch. With hard hitting consumer ads in the national daily press, this is going to be a very hot property.

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Trade Contact: The Jenks Group. Telephone 0494-442446.

The Mentholatum Company.

**Dispensing
GPs delegate
to Boots**

**Society gets
positive line on
repeat scripts**

**New drugs with
novel actions**

**Morgans build on
120 year heritage**

**ABPI reluctantly
accepts PPRS**

**CHEMEX
EXHIBITION**



**Hot news from
Chemex 1993**



The Corsodyl spokesman

Corsodyl Mouthwash has the unequivocal recommendation of dentists.*

They know there's no better way for their patients to take care of gingivitis, or for that matter, conditions as diverse as aphthous ulcer, oral candidiasis and denture stomatitis.

They know that **Corsodyl's** active ingredient, 0.2%[†] chlorhexidine, sets it apart. They know also that for all **Corsodyl's** clinical heritage its range is adapted for patient-friendliness, with a new spray as the latest innovation.

Corsodyl has recently been acquired by SmithKline Beecham Consumer Brands. Speak to your SmithKline Beecham representative or telephone free of charge 0800-833000 for any further information or requirements.

CORSODYL

chlorhexidine gluconate

No Gingivitis. No Contest. No wonder dentists recommend it.

PRODUCT INFORMATION Consult Data Sheet before prescribing. **USE** Inhibition of plaque; treatment and prevention of gingivitis, maintenance of oral hygiene. Mouthwash and Mint Mouthwash are also indicated for the promotion of gingival healing following surgery and the management of aphthous ulceration and oral candidiasis. **PRESENTATION** Spray and Mint Mouthwash: A clear colourless solution containing 0.2% w/v chlorhexidine gluconate. Mouthwash: A clear pink solution containing 0.2% w/v chlorhexidine gluconate. Dental Gel: A clear colourless gel containing 1% w/w chlorhexidine gluconate. **DOSAGE AND ADMINISTRATION** Spray: Apply to tooth and gingival surfaces using up to twelve actuations of the spray twice daily. Mouthwash and Mint Mouthwash: Rinse mouth with 10ml undiluted for one minute twice daily. Prior to dental surgery, rinse mouth with 10ml for one minute. Dental Gel: Brush the teeth with one inch of gel for 1 minute, once or twice daily. **CONTRAINDICATIONS** Previous hypersensitivity reaction to chlorhexidine. Such reactions are, however, extremely rare. **PRECAUTIONS** For oral use only, keep out of eyes and ears. **SIDE EFFECTS** Occasional irritative skin reactions. Generalised allergic reactions to chlorhexidine have also been reported but are extremely rare. Superficial discolouration of the tongue, teeth and tooth-coloured restorations may occur. This usually disappears after discontinuation of treatment. Staining can largely be prevented by cleaning teeth or dentures before use but may sometimes require scaling and polishing for complete removal. Stained anterior tooth-coloured restorations which are not adequately cleaned by professional prophylaxis may require replacement. Transient taste disturbances, burning sensation of the tongue and oral desquamation. Very occasional parotid swelling. **PRODUCT LICENCE NUMBER AND BASIC NHS COST** 'Corsodyl' Spray (0029/0230) 60 ml (OP) £2.80 'Corsodyl' Mouthwash (0029/0124) 300 ml (OP) £1.25 'Corsodyl' Mint Mouthwash (0029/0201) 300 ml (OP) £1.25 'Corsodyl' Gel (0029/0080) 50g (OP) £0.83 'Corsodyl' is a trademark. **Legal Category P** Date of last revision March 1993. *Source: Milpro Independent Research, 1992. †Corsodyl Dental Gel contains 1% w/w chlorhexidine gluconate.



SK SmithKline Beecham
Consumer Brands

SmithKline Beecham Consumer Brands, Brentford, TW8 9BD, UK. Tel: 081 560 5151

• a leading authority on oral hygiene.

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Comment

One week to go and counting down to Chemex ... For pharmacists who plan to visit this "must" event in the pharmacy calendar our show preview, published as a supplement to this week's issue, is the definitive guide to the increasing number of product launches timed to coincide with Chemex — as well as to the myriad of show special promotions, offers, prizes and freebies.

Since June, as sponsoring magazine, we have been publishing Chemex Corners, detailing the innovations introduced this year by sister company MGB Exhibitions. And last week, in the final one, we did a round-up of product launches which were publicised before the exhibition.

The Chemex catalogue will reveal all — who's there, where they are, company show unique selling points (USPs) and so on — but an edition can only be collected at the entrance to the twin exhibition halls at Wembley. Each catalogue is numbered and *Chemist & Druggist* has 200 bottles of wine waiting on stand C10 for those who can match their number with the Editor's list.

Turn to this week's cartoon, or to p3 of the preview if you are a manufacturer, for further details of what you can find on the C&D stand — a holiday for two in the sun or

£10,000 worth of advertising in the newsweekly for pharmacy — plus our editorial team, and your chance to have a say in the development of C&D and its many products, all published as part of our comprehensive subscription package.

Also on stand C10, you can collect an advance copy of the September 18 edition of our bi-monthly supplement for pharmacy assistants, *Over the Counter*, or pick up a second copy (for £7.50) of the third edition of the *Chemist & Druggist Guide to OTC Medicines*, to be published for subscribers with next week's issue.

Xrayser has positive thoughts on Chemex and tells us the he (or is it a she?) and Dotty will be treading the boards for this year's hands-on pharmacy fix! For manufacturers anxious to identify C&D's columnist — and to hand over a gong for an unsolicited plaudit or a black spot for an unwelcome brickbat — this could be your chance to meet in the flesh. One tip: Xrayser will not be on stand C10!

But whether you are an Xrayser-watcher or simply out to add a once-a-year round-up of the latest in pharmacy business to the weekly news and views package in these pages, the C&D team and organisers MGB Exhibitions look forward to welcoming you to Chemex on Sept 12-13.

Dispensing GPs delegate to on-site Boots

A controversy has arisen over whether dispensing doctors can delegate their dispensing to a registered pharmacy on the practice premises.

When Colehill in Dorset was recently reclassified as an urban area rather than rural, the dispensing patients of Dr Hatherley and partners in Wimborne were transferred to their prescribing list. Boots were delegated to dispense for the remaining 2,000 dispensing patients from a pharmacy at the GPs' new premises.

In a letter to the Local Pharmaceutical Committee, Dorset Health Commission's operations manager Adrian Wright said that when the GPs were given permission for a pharmacy on the premises, they were told they were still responsible for the

dispensing arrangements of patients remaining on their dispensing list.

The GPs could form an agreement with the in-house pharmacy to dispense for those patients and submit prescriptions separately to the Pricing Authority. The GPs would be responsible under their terms of service for complaints.

His letter went on to say that the provision of general medical services often involves delegation of duties to other health professionals such as nurses or locums.

"It is the responsibility of the GP to satisfy himself that it is clinically reasonable to delegate in any particular circumstances," the letter continued.

"While the Regulations regarding the provision of pharmaceutical services are silent on the question of delegation, we have

taken the view that if a GP can similarly delegate responsibility for dispensing to a partner, the practice's dispenser or another practice, he should also be allowed to delegate to a pharmacy.

"The GP clearly retains responsibility for the dispensing and for ensuring that whoever he delegates the task to is suitably competent."

But the LPC believes the arrangement is "totally wrong". Chairman Leo Burke told *C&D*: "We feel a dangerous precedent is being established and the Society could be losing its power over the situation."

He believes the pharmacy would be free from liability if a problem occurred and the Society may then abrogate its responsibility for dispensing.

The Pharmaceutical Services

Negotiating Committee is looking into the matter. Assistant secretary Mike King said that opinions differed as to whether subcontracting by dispensing doctors was lawful or not and the Regulations gave no clear-cut answer. PSNC wrote to the DoH for clarification as long ago as January but had had no reply so would be writing again.

Sue Sharpe, head of the Society's law department, said she understood the pharmacy premises were registered with the Society so would be subject to the usual controls and inspections.

Pharmacists working from the premises would also have the same professional responsibilities as those working from other registered pharmacies, and would have to comply with the Society's standards and Code of Ethics.



We can prove that we didn't touch a drop of your wine if you join the *Chemist & Druggist* team on Stand C10 and check your catalogue number with the Editor. If you match with one of the 200 numbers on his list, a bottle of wine will be yours to take away (see also p363)

Bloody attack on assistant

Pharmacists should beware a new style of intimidation after a syringe of blood was squirted in the face of a Liverpool pharmacy assistant during a robbery.

The assistant refused to hand over any money to two women, despite dripping with blood, and they left the shop with cosmetics.

A woman has been charged with robbery and remanded in custody. Another woman is on police bail.

PSG go on a mission to explain

The Pharmacy Support Group have issued a "mission statement" to coincide with their appearance at Chemex: "To promote the delivery of quality pharmaceutical care and to demand justice for all."

It outlines what the group stands for, its activity until now and what it hopes to achieve, says chairman Hemant Patel.

He says that the latest Plimsoll Publishing report on 894 com-

munity pharmacists shows that some 50 per cent of pharmacies are in danger of going under. He told *C&D*: "Pharmacists must be made aware of the problems that lie ahead."

The PSG say they aim to ensure the survival of community pharmacy, and hope to encourage pharmacists attending Chemex to exchange ideas on the latest remuneration offer from the Department of Health.

NI May scripts

Payment made to Northern Ireland chemist and appliance contractors for May show that 839,685 scripts were dispensed with a total of 1,294,107 items. The net ingredient cost per item was £7.38.

NAHAT trust Trusts

The National Association of Health Authorities and Trusts have welcomed the Government's fifth wave of NHS Trust applications, which will separate them completely from health authorities. Chairman Dr Chris Robinson commented: "District health authorities will be free to concentrate on their key role of purchasing services appropriate to the needs of their local population."

GPs doing well

Some 88 per cent of patients thought their family doctor had performed at least as well or even better than the previous year, according to a new Government survey by the Citizen's Charter Unit. Some 70 per cent of users of hospital services reported similar satisfaction.

Guidance review

Doctors are to get guidelines on the way they should identify other doctors who are making decisions which could harm patients, announced Health Secretary Virginia Bottomley last week. The review is being chaired by the Chief Medical Officer Dr Kenneth Calman. This follows the report that some cancer patients were wrongly diagnosed at a Birmingham hospital.

Red tape hits homes

NHS and local government changes are causing differences in the standards of nursing homes required by each authority.

The National Association of Health Authorities and Trusts' consultant on nursing homes, Chris Vellenoweth, says the changes have produced "a complex and unsatisfactory cobweb of regulatory processes".

Nursing home owners face:

- registration or licence to trade
- meeting purchasers' needs
- "arm's length" inspections by social services and health authorities contracting with the private sector.

Pharmacist meets letter row MP

Hertfordshire pharmacist Michael Richard, who is the subject of a possible threat of complaint to the Royal Pharmaceutical Society by his MP, is to meet him next week.

Robert Jones (Conservative) responded to a letter from Mr Richard, which highlighted the possible effects of DoH remuneration proposals (C&D August 7), with accusations of frightening elderly customers with the threat of closure.

Mr Richard, vice-chairman of Hertfordshire LPC, hopes to be joined by another LPC member and a customer, and hopes for a full apology and retraction.

Positive first reaction on repeat scripts

The Pharmaceutical Society has had a favourable reaction from doctors' representatives to its proposals for pharmacists to manage repeat prescriptions.

Representatives of the Society had informal discussions with the British Medical Association last week about pilot trials in which pharmacists would dispense long-term medication in instalments.

Protocols have already been submitted to the Department of Health, which will provide funding for the trials.

Roger Odd, head of the Society's practice division, told C&D: "The doctors' representatives were

quite positive about the idea because they could see that pharmacists have a role to play."

Mr Odd hopes the trials will start as soon as possible and definitely by the end of the year. He did not know yet how many pharmacies would be involved as different protocols would be examined. For example, repeat prescriptions could be generated by doctors or by pharmacists.

The Society has also consulted the Royal College of General Practitioners.

Pulse newspaper last week quoted Dr Jim Gilleghan, a member of a new RCGP working party on prescribing, as saying

that pharmacist involvement was a reasonable idea for drugs which were used regularly.

But Dr Richard Tiner, a member of the General Medical Services Committee's prescribing committee, was quoted as saying that the plan "would be a terrible idea for drugs that need regular monitoring — I would be worried about patients slipping through the net".

A recent National Audit Office report recommended greater pharmacist involvement as a means of reducing the wastage currently associated with repeat prescribing (C&D August 14 p245).

Script costs and numbers rise

Between 1982 and 1992 the number of prescriptions dispensed in England rose from 330.5 million to 425.1 million, and the net ingredient cost per prescription has increased from £3.13 to £6.72.

From 1991 to 1992, the trends in prescribing show that the elderly, young people and those on the NHS low-income scheme all had an increase in the number of prescriptions dispensed. Respectively they were: (elderly) 5 per cent to 168 million, giving a 43 per cent share of the prescription total; (young) 4 per cent to 43 million, giving an 11

per cent share; and (low income) 15 per cent to 47 million, giving a 12 per cent share.

The six largest therapeutic group categories accounted for 71 per cent of the total net ingredient cost of drugs and the same proportion of the total number of prescriptions.

The largest group in terms of cost is cardiovascular, with a 19 per cent share. The fastest growing group was preparations for the central nervous system, with an 11 per cent share. The net ingredient cost rose by 25 per cent in this group.

The largest cash increase in net

ingredient cost was for ulcer-healing drugs, which rose by 20 per cent to £266 million. The number of prescription items increased 13 per cent to nine million.

The analysis includes all scripts dispensed by community pharmacists and appliance contractors, dispensing doctors and scripts submitted by prescribing doctors for items personally administered.

• *Statistics of prescriptions dispensed in the family health services authorities: England 1982 to 1992*, ISBN 1 85839 133 4, is available from HMSO at £2.

Devon FHSA rejects Boots application

Devon Family Health Services Authority has turned down an application by Boots to open a new pharmacy in Okehampton.

The application was rejected because the FHSA felt that the two existing pharmacies in the area, Lloyds and an independent, already provided an adequate service. The ruling was backed by Exeter and District Community Council amid fears that an additional pharmacy would force an existing one out of business.

The Boots store is only two doors away from the Lloyds pharmacy. Extensive alterations have already been done in anticipation of its proposed November opening.

An FHSA spokesman said that Boots had one month in which to lodge an appeal against the ruling. A Boots spokesman said the situation was under review and would not comment on whether they would open as a non-dispensing pharmacy.

Dispute in Keelby

Dispensing doctors in Keelby, North Lincs, are seeking a judicial review against the granting of permission for a pharmacy to start dispensing in the village.

In May 1992, pharmacist David Stenton applied for a contract to dispense in the village, which has no pharmacy. Following an oral hearing last Autumn, Lincs

Family Health Services Authority granted the application, but Dr [name??] Carr and his partners appealed against the decision.

Although the matter still rests with the Appeals Unit in Harrogate, the GPs' solicitors have now applied for a judicial review.

The FHSA is taking legal advice on how best to deal with the issue.

Hepatitis B care

Guidance aimed at protecting NHS staff from contracting hepatitis B has been issued by the DoH. It stresses the importance of immunisation and safe working procedures. Copies are available from: BABS, Health Publications Unit, DSS Distribution Centre, Heywood Stores, Manchester Road, Heywood, Lancs, OL10 2PZ.

Health initiative

Two schemes to boost healthcare in the Mersey region have been announced. The first is a £1.2 million diagnostic service at Alder Hey Children's Hospital. The second is the first locally-based endoscopy service at Priory Medical Centre, Anfield.

Ventodisks recall

Allen & Hanburys are recalling a single lot of Ventodisks 200mcg refill packs. They contain 14 disks and each of these has eight "blisters" which contain a dose of the asthma medicine salbutamol.

The company are recalling the lot as they have discovered that a small number

of the disks are empty. As few as 14 disks may be affected out of some 13,000 packs.

The packs affected are marked "Lot W5463DB" on the long side of the box. The inner disks are marked "Lot 546".

Patients with an affected pack should return it to the pharmacy where it will be exchanged for a new one. Allen & Hanburys. Tel: 081 990 9888.

NHS complaints

A new committee has been set up to look at the handling of complaints about the NHS. The NHS Complaints Review Committee is inviting written evidence from organisaions and individuals to help form its recommendations to the Health Secretary.

Opticians criticised by Which?

Most opticians only display the price of frames, which can have little bearing on the final price paid, says Which?

Fewer than one in 12 opticians displayed the total price of a pair of spectacles and only one of the UK's largest chains, Specsavers, displayed complete prices.

Down the road to another monopoly

The inevitable result of the decision to allow Uncle Tom Cobley and all to sell contact lens solutions and compete on price is now here for all to see.

I used to sell Ciba-Vision 10-10 solutions quite steadily, but not any longer. Now all I am good for is the advice and then its down to Tesco to buy their supplies because, according to large adverts in the national dailies, you can pick up these solutions off the health and beauty shelves at 30 per cent off.

Their prices are indeed unbeatable and a quick glance at my wholesaler price list shows that I cannot compete. After VAT the solutions are cheaper from Tesco at retail than I can buy wholesale!

Now there is vindication of policy! Once the Government has removed all the profit from my NHS dispensing and, in the public interest, allowed the supermarkets to cut my throat on all those so profitable counter medicines, I can then proceed to the bankruptcy court proud that I have been of help in a achieving another multiple monopoly.

Wellcome intellectual stimulation

I have now received the last module of the Zovirax Cold Sore Cream training pack which arrived on the same day my counter pack of the real thing. Ignoring the justified criticism of Wellcome's pricing policy, I must congratulate them on what must be the most comprehensive training package ever provided for a "POM to P" launch.

The assistant and pharmacist packages have both contained excellent training material, but instead of keeping the two packages separate I have



combined them so that those of my staff with the most interest and ability can obtain the maximum benefit.

This has worked well and particularly taxed my brain. The more detailed the information in the package, the more precise the questions the girls have asked me. Without exception my staff are better motivated by too much information, compared to those packages which cause resentment by treating them like intellectual failures.

It is now down to Wellcome to stimulate the public to ask the questions the package has been designed to answer. The market is huge and I am 100 per cent behind the launch but the advertising must not prevent me from exercising my counselling role by encouraging the sale of Zovirax in inappropriate situations.

Make your display pay

Display space in the pharmacy is at a premium and I am always being pressurised by manufacturers to maximise the footage I give to their products. It is a never ending battle because the products

themselves are forever changing and I am the first to accept that display does sell.

So far I have always used the empirical approach to this problem... Dotty calls it the line of least resistance! And some of the more persistent reps have got away with murder, but Crookes have recently reminded me that my counter space is valuable and if the multiples can demand payment for prime display space then why can't I?

The incentive is a display unit of Nurofen which, if kept on the counter until next March, will earn me an extra £96 in free stock. I know this approach is not new but the reminder was necessary because I am perhaps too easily swayed by the blandishments of expert salesmen.

But the lesson is learned. My space is valuable and in future I will be hard. If they want my counter for display then something more than a pretty Perspex unit and a couple of pens will be required to obtain my co-operation!

Happy days are here again

Chemex has come around again and so fast! It doesn't seem like a year ago that I fought anonymously with the crowds to view the latest in computer EPoS wizardry. As usual Dotty has invited herself along, maintaining that if I go alone all I will do is drink coffee and talk to all those friends that I haven't seen since last year.

I don't believe a word of it. She enjoys herself just as much as I do and I view our roles as complementary. She is superbly efficient and the shop benefits from the wealth of information she will glean on new products and special offers, while I build up those essential social contacts without which her job would be so much more difficult!

I rarely miss Chemex and, yes, it is a marvellous place to renew old acquaintances but it is also a shop window on the world of community pharmacy. It can sometimes be difficult finding the time and it is a long way to go but it is also an essential annual experience for feeling the pulse of community pharmacy.

N. Ireland Notebook

A drop of the hard stuff but no more

I support Xrayser's call for pharmacists to become involved in promoting a healthy attitude towards alcohol use (C&D July 31), and more particularly in preventing its misuse.

Alcohol is an effective social lubricant and so much part of our culture that it is easy to forget how destructive it can be. Having had personal experience of alcoholism I support any idea to make people drink sensibly, but it will be difficult to implement such an initiative. To the public, the health benefits of sensible drinking are not as clear cut as stopping smoking.

People's use and attitude to alcohol in Northern Ireland is unusual

In our daily contacts with customers we regularly see the ill effects of excessive drinking: the Saturday morning hangover, the liver complaints, obesity and alcoholism. For a European country, the use of and attitude to alcohol in Northern Ireland is unusual, probably a result of our religious heritage. One-third of the population abstains compared with 10 per cent in England. However, binge drinking is much more common here, and it is estimated that the health of about one-third of the population is affected by their drinking habits.

I have identified many customer contacts where I could comment on sensible drinking. I am often asked if it is safe to drink alcohol when taking medicines, and few weeks pass without a request for a hangover remedy. These requests should be followed up with a comment on drinking sensibly, but I would be reluctant to go much further.

Behind this timidity is the fact that I am anxious not to offend my customers. Their patronage is why I remain in business. It is one thing to give sympathetic advice when someone asks for it, but unsolicited comments on alcohol misuse, no matter how well intentioned, might elicit a rebuke to mind my own business and result in less of it.

Alcohol misuse presents an important health issue. I would like to take a greater role in this area, so I would be delighted to hear of practical suggestions that will help achieve this objective without affecting my business.

Written by a practising Northern Ireland community pharmacist.

Topical REFLECTIONS



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CAN'T
HIT PAIN
MUCH
HARDER**

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Abbreviated Product Information. Presentation: Each white tablet engraved PARAMOL contains 500 mg paracetamol BP and 7.46 mg dihydrocodeine tartrate BP. **Indications:** For the relief of headache, migraine, feverish conditions, period pains, toothache and other dental pain, backache and other muscular aches and pains. **Dosage and Administration:** PARAMOL should, if possible, be taken during or after meals. *Adults and children over 12 years:* 1 or 2 tablets every four to six hours. Do not exceed 8 tablets in any 24 hour period. *Children under 12 years:* Not recommended. **Contra-indications, Warnings, etc:** *Contra-indications:* Respiratory depression, obstructive airways disease. *Precautions:* Dihydrocodeine may induce the release of histamine, therefore caution should be exercised before dispensing PARAMOL Tablets to asthmatic patients, or patients with allergic disorders. *Use in pregnancy and lactation:* There is no or inadequate evidence of safety in human pregnancy but the drug constituents have been used for many years without apparent ill consequence. *Side-Effects:* Side-effects are rare in therapeutic doses. Constipation, if it occurs, is readily treated with a mild laxative. **Legal Category:** P. **Package Quantities and Price:** £2.19 for pack of 12 tablets. **Product Licence Number:** PL 0337/0190. **Product Licence Holder:** Napp Laboratories Limited, Cambridge Science Park, Milton Road, Cambridge CB4 4GW. UK. Tel. 0223 424444. Member of Napp Pharmaceutical Group. Further information is available from: Napp Laboratories Limited. Date of Preparation: 11.5.93.

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Scriptspecials

New presentation for Dalacin

Upjohn are extending their Dalacin range with a cream containing clindamycin phosphate equivalent to clindamycin 20mg per gram. Dalacin cream 2 per cent is indicated for the treatment of bacterial vaginosis.

Bacterial vaginosis (BV), previously known as non-specific vaginitis (NSV), is associated with a variety of micro-organisms. It is often mistaken for candidiasis, although BV differs by having a pH greater than 4.5, no inflammation and a distinctive "fishy" odour. BV has been linked with premature rupture of the membranes, preterm labour and an increased risk of post-operative infection after some gynaecological surgery. It may also be associated with pelvic inflammation.

One applicator full of cream (approximately 5g) is inserted intravaginally at bedtime for seven days. Each 40g pack (£9.05) contains seven measured doses. Upjohn say the clinical cure rate with Dalacin cream is equivalent

to oral metronidazole with minimal risk of side effects commonly associated with systemic treatment.

Dalacin is contraindicated in patients previously found to be hypersensitive to preparations containing clindamycin or any of the components of the cream base. Dalacin cream should not be used in patients with lincomycin sensitivity because of the possibility of cross sensitisation.

The use of clindamycin may

result in the overgrowth of non-susceptible organisms, particularly yeasts. If significant diarrhoea occurs treatment should be discontinued.

Dalacin cream contains some oil-based components which have been shown to weaken the rubber of condoms and diaphragms, and make them less effective as a barrier method of contraception or as a protection from sexually transmitted diseases including AIDS. **Upjohn Ltd. Tel: 0293 531133.**

Lisinopril approved for GP initiation in CHF

The once-daily ACE inhibitor lisinopril has been approved for GP initiation in the treatment of congestive heart failure. It is available in the UK as Carace from Du Pont Pharmaceuticals and Zestril from Zeneca Pharmaceuticals.

Patients are initiated on a dose of 2.5mg lisinopril once daily and then titrated to a maintenance

dose of either 5mg, 10mg or 20mg once daily.

Carace has been available for GP initiation in hypertension since 1988. Zestril, launched by Zeneca in 1988, is already registered in 67 countries for the treatment of hypertension and is also indicated for the treatment of CHF in all major markets with the exception of Japan.

Cyklokapron syrup relaunched

Kabi Pharmacia are reintroducing Cyklokapron Syrup (tranexamic acid 500mg per 5ml). It has been reformulated to include a new orange flavour. New Cyklokapron syrup is available in 300ml bottles (£15.60) which have a tamper proof cap.

Tranexamic acid is an antifibrinolytic agent which competitively inhibits the activation of plasminogen to plasmin. It is indicated for short-term use for haemorrhage or risk of haemorrhage in increased fibrinolysis or fibrinogenolysis.

Gastro-intestinal disorders, such as nausea, vomiting and diarrhoea, may occur but disappear when the dose is reduced. Patients who experience disturbance of colour vision should be withdrawn from treatment.

The shelf life after opening the syrup is three months. **Kabi Pharmacia Ltd. Tel: 0908 661101.**

Lower dose mifepristone effective

Early abortions can be carried out as effectively with a single dose of 200mg mifepristone as the currently recommended dose of 600mg when used in combination with a vaginal pessary of 1mg gemeprost, according to a study in the *British Medical Journal*.

Single doses of either 200mg, 400mg or 600mg mifepristone were administered to almost 1,200 women with an early pregnancy followed, 48 hours later, by a vaginal pessary of 1mg of the prosta- and E1 analogue gemeprost.

Of the 1,151 women with known outcome, 91 per cent of those given 200mg had a complete abortion; 94.1 per cent of those given 400mg and 94.3 per cent of those given 600mg. The rates of complications and side effects was similar in all three groups.

Roussel, manufacturers of Mifegyne, say the single dose of 600mg is the only dose approved by the licensing authority and therefore they would advise prescribers to only use this dose.

Betagan

Betagan (levobunolol hydrochloride 0.5 per cent) is now available in a preservative free form — Betagan unit dose (30 x 0.4ml vials, £10.99). **Allergan Therapeutics. Tel: 0494 427029.**

Cutifilm on Tariff

Cutifilm adhesive semi-permeable film dressing is now listed in the Drug Tariff and will be reimbursable in the community (10 sheets, 14cm x 10cm, £10.60; 10 sheets, 7.5cm x 10cm, £6.20). **Beiersdorf UK Ltd. Tel: 0908 211444.**

Gonadotraphon LH

Gonadotraphon LH 5000iu (human chorionic gonadotrophin BP) singles are now available. Stocks may be obtained from **Boehringer Ingelheim Ltd. Tel: 0344 424600.**

Integrity sheath

The Bard Integrity, a new one-piece penile sheath which is supplied in an applicator to make fitting a simpler process, is now available on prescription. It is available in three sizes: 25mm, 30mm, and 35mm. Each soft latex sheath incorporates a layer of a new hypo-allergenic adhesive which can be easily removed and leaves no sticky residue. **Bard Ltd. Tel: 0293 527888.**

Fersaday price

The price of Fersaday 28 tablets has been increased by Goldshield who recently took over the marketing and distribution of the product from Evans Medical. The wholesale price increases from £0.45 to £0.70 and the retail price from £0.70 to £1.09. **Goldshield Pharmaceuticals Ltd. Tel: 081-684 3664.**

One Touch strips

The price of 50 One Touch test strips printed in last week's issue (£20.42) referred to the retail price. The basic NHS price is £12.43. **Lifescan. Tel: 0494 450423.**

Zovirax dispersible

The Wellcome Foundation are replacing the current presentation of Zovirax shingles treatment with dispersible tablets. The price of the new Zovirax Shingles treatment pack remains the same (35 £113). **The Wellcome Foundation Ltd. Tel: 0270 583151.**

Roussels' new prices

Roussel are reducing the prices of Sofradex ointment (5g £2.00), Sofradex drops (10ml £4.00), Soframycin ointment (5g £0.90) and Soframycin drops (8ml £2.20). The prices of a number of other products are being increased. **Roussel Laboratories Ltd. Tel: 0895 834343.**

Glandosane

Glandosane, the artificial saliva, is now available in a peppermint flavour. The product has ACBS approval. Each 50ml aerosol has a basic NHS price of £3.95 and a retail price of £6.96. **Fresenius Ltd. Tel: 0928 579444.**

Cyprostat 100mg

Schering Health Care say Cyprostat (cyproterone acetate) 100mg tablets will not be available until October 4. **Schering health Care Ltd. Tel: 0444 232323.**

Timesco Medi-nebs

Timesco have introduced four new nebulisers which are suitable for most aerosol therapy. Prices range from £79.95 to £139.95. **Timesco Tel: 071-278 0712.**

Cancer brochure

The latest brochure from the Imperial Cancer Research Fund "Preventing and Curing Cancer" is an update on the latest research into the causes of cancer and treatments. A copy can be obtained by sending a large (9" x 12") sae to "Preventing and Curing Cancer", Public relations department, Imperial Cancer Research Fund, PO Box 123, Lincoln's Inn Fields, London WC2A 3PX. The brochure is free but donations would be most welcome.

- Palmolive 2 in 1 -

A LAUNCH SO BIG ARCHIMEDES WOULD HAVE BEEN PROUD

Many great discoveries have emanated from the bathroom but few can compare with the launch of our new 2 in 1 bath and shower products, uniquely formulated to moisturise and condition as they clean.

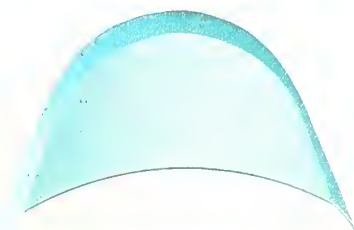
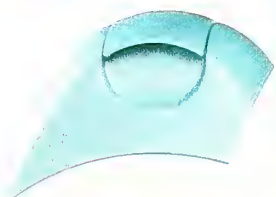
It's one of the most technically advanced ranges the buoyant toiletries market has seen in 2,000 years.

Available in a variety of pH balanced skin types, Palmolive 2 in 1 is the brand that's right for all the family.

And with a £3 million TV campaign plus 6 million door-to-door samples, it doesn't take a mathematical genius to recognise the potential it will have for your store.



Skin care you can feel



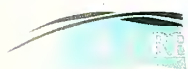
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2 in 1
NORMAL SKIN



2 in 1
SENSITIVE SKIN



in 1
DRY SKIN



2 in 1
SENSITIVE SKIN



2 in 1
NORMAL SKIN



For further information or merchandising contact Michael B. Development Manager Colgate Palmolive 018 22

Counterpoints

Togs unisex solution for day and night

Swaddlers are relaunching their Togs premium disposable nappy in unisex variants for day-time and night-time use. The new range will be available from September 27 and should reach retailers by early to mid-October.

The unisex range will boost retailers' profits by offering an increased margin — well into double figures for independents — from a third less shelf space, claims the company.

Togs Day-time will be available in five sizes, each providing approximately two week's supply: maternity (24 £3.99), mini (42 £4.99), maxi (28 £4.99), junior (24 £4.99).

Togs Night-time comes in three sizes, all priced £3.99: midi (18), maxi (16), junior (14).

The new range also claims improved performance with a new liner, stronger tapes, an elasticated waist and improved leakshields. The two junior variants will also be a bigger fit. Swaddlers say they will be the largest premium nappy on the market.

A £3 million promotional programme is to support the relaunch. A £1.5m national television campaign on GMTV and satellite channels will break in November and run for six months until April 1994. Three different formats using the Prof Togs character will be used, one promoting the day/night concept and two supporting on-pack offers.

An on-pack £3 cashback offer will be stickered on all packs for the first two months post-launch for parents submitting proofs of purchase from Day-time and Night-time variants. The offer will be advertised in the women's and parental Press as well as on television.

A sampling programme to mothers with babies aged 0-26 months will see over 1 million samples distributed via Bounty Bags and the Press in the first six months.

Swaddlers are repeating their "leak free night or



your money back" guarantee which doubled sales for their Night-time brand earlier this year. All Night-time variants will be flashed and the guarantee backed up with TV and Press adverts.

Swaddlers are aiming to boost their brand share from its present level of around 5 per cent to 18 per cent within 18 months.

The company first launched a large absorbent night-time nappy in March 1992. By May this year it accounted for 15 per cent of Swaddlers total sales, worth over £3 million, demonstrating that there is a strong demand from mothers for a large absorbent nappy designed for night usage.

Research showed that

9.6 per cent of users were in the 4-9 month age group, 40.4 per cent in the 10-18 month age range, and 50 per cent in the 19-30 month range.

Mothers want a day-time nappy that offers increased comfort and freedom, and are prepared to pay a premium for an ultra-thick product for use at night, argue Swaddlers. The company uses this to support the 16 per cent price premium versus Pampers Junior (23.7p to 20.5p).

Swaddlers say that mothers using new Ultra Togs are likely to spend £13.97 a fortnight compared to £11.98 with Togs Boy/Girl, generating a 16 per cent increase in cash profit. **Swaddlers Ltd.** Tel: 091-482 5566.

Lemsip add menthol

Lemsip Menthol Extra, a hot lemon drink for colds and flu, is Reckitt & Colman's latest introduction to their brand-leading hot drinks range.

It contains the same active ingredients as Lemsip — paracetamol 650mg, phenylephrine hydrochloride 10mg and vitamin C 50mg per sachet — with the addition of menthol whose vapours help to clear a blocked nose when hot water is added (5, £1.78; 10, £2.88).

The levels of decongestant and vitamin C have been increased in Lemsip Hot Lemon and Hot Blackcurrant, to correspond with the new variant. All are GSL products.

The dose of Lemsip Menthol Extra is one sachet every four hours to

a maximum of four sachets in 24 hours, for adults and children over 12.

Packaging is in the familiar green and yellow livery, with a blue bar to highlight the extra menthol. The launch coincides with the introduction of new pack designs for the other Lemsip variants.

The brand will be supported by a £4 million national television campaign this Winter. There will be two new commercials, one for hot drinks including menthol extra and the second for Lemsip flu strength. The first menthol specific advert is likely to appear at the beginning of October. In-store display material and leaflets will be available. **Reckitt & Colman Products.** Tel: 0482 26151.



Mentadent gets Night-time toothpaste

Mentadent Night Action is a new concept in oral

hygiene being launched in September.



Its use at night protects teeth by neutralising plaque-acids caused by food and drink during the day, and to remineralise the tooth surface after day time acid attacks, say Elida Gibbs.

Mentadent Night Action is a combination of three active ingredients: calcium carbonate, to neutralise plaque acid; triclosan, an anti-bacterial to fight plaque; and fluoride to toughen teeth and prevent decay. Its claims have been approved by the British Dental Health Foundation and the Department of Health.

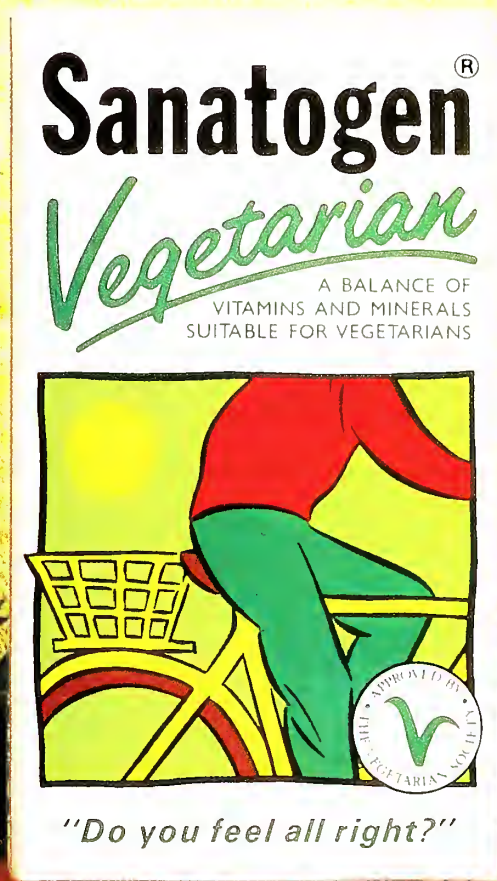
It is hoped that the cool mint flavoured toothpaste will add a further 4 per cent onto Mentadent's

existing 5 per cent share of the oral hygiene market.

The launch is being backed with a £3.5 million promotional campaign. This includes television advertising using the slogan: "The toothpaste that never sleeps". Television advertising will run for six weeks from mid-October with a further burst in January. A £750,000 sampling campaign will begin at the end of November.

The product is available in two sizes of stand-up tubes with a flip-top cap and retails at £1.09 for 50ml, £1.89 for 100ml. The 50ml tube is on special offer at £0.69 for the launch. **Elida Gibbs.** Tel: 071-486 1200.

It's perfect for a growing market.



More and more people are realising a well-planned vegetarian diet can give them all the nutrients they need.

Trouble is, people don't always lead a well-planned life.

They might get up late and skip breakfast. Grab an apple and a bag of crisps for lunch. Or go to a dinner do and find the host has forgotten the vegetarian, so they're left nibbling a bowl of nuts.

But now you can offer them Sanatogen Vegetarian.

Each daily dose has the right amount of the essential vitamins

and minerals anyone on a vegetarian diet needs to stay healthy.

There's B12 for healthy blood cells and stamina. B2 for energy, and B6 to help the body use protein. And there are the important minerals calcium, zinc and iron.

Made totally from non-animal ingredients, Sanatogen meets with the approval of the Vegetarian Society.

And with more and more vegetarians walking through your door, it'll meet with your approval too.

Sanatogen
Vegetarian

Sally Hansen polish up nailcare range



The Sally Hansen nailcare range is being relaunched with new packaging and extended with the addition of ten products.

The range has been split into five colour-coded categories: Cuticle Care (blue), Nail Repair (green), Strengthen & Grow (lilac), Top & Base (yellow) and Manicure Helpers (pink).

New to the range are Gel Cuticle Remover (£3.95), which incorporates a cuticle pusher in the tube to push back cuticles; Vitamin E Nail & Cuticle Oil (£3.95); Rich Cuticle Massage Cream

(£3.95); One Coat Instant Strength (£3.95), to protect nails; Dries Instantly Base Coat (£3.95); Dries Instantly Top Coat (£3.95); No Chip (£3.95), an acrylic top coat; Double Duty (£3.95), a combined top and base coat; French Manicure Kit (£4.95); Nail White pencil (£1.85), which has a cuticle pusher at one end.

The new look packs are in white and peach, the logo has been updated, and products are blister-packed.

Sally Hansen have set up an advisory service for consumers and introduced

an information leaflet called Handout. The leaflet explains nail types, how nails grow and advice on treating problems. For the advisory service, consumers send their name and address to Nail Tips Advisory Service, Freeport TN1528, Tunbridge Wells, Kent TN4 8BR, and a questionnaire will be sent to them. The consumer fills this in and in return a personal nailcare programme will be devised. **Network Management. Tel: 0252 29911.**

September discounts at Unichem

Special offers from Unichem for September include discounts on Johnson & Johnson baby products, with 200g baby powder down to £7.34 for a pack of 12, 300ml baby lotion down to £13.73 for 12, 300ml baby oil pack at £13.58. Extra discounts are offered for Goldpartners.

Simplicity is being promoted, with regular 20s and super 18s reduced to £14.75 for an outer and Night Time 10s down to £20.81. Goldpartners are offered 32 per cent discount.

Salon Selectives conditioners and shampoos are down to £6.46 for a pack of six. Studio Line Fixing Spritz 150ml is offered at £8.13 for a pack of six and Hyper Charged Pump is down to £8.15 for six.

Macleans Mouthguard 300ml is down to £5.81 for six and Fr. Shmrint toothpaste 500ml is on offer at £5.55 for 12. Slim-Fast soups are on offer at £21.89 for a pack of six, giving a POR of 27 per

cent.

Unichem's own label range offers 30 per cent off supplements. When sold to consumers on a buy two get one free basis, they offer PORs of 30-49 per cent. Point of sale material is available to highlight the offer, which will be advertised in the *Daily Express*. **Unichem. Tel: 081-391 2323.**

Smear-free specs with Wipe 'n Shine

Wipe 'n Shine are new spectacle wipes from Carr & Day & Martin.

Presented in a resealable packet, the wipes are suitable for plastic, glass and coated lenses, keeping them clean and dust-free. There are 20 wipes in a pack (£1.29), with a display outer available. **Carr & Day & Martin. Tel: 0625 539135.**

Daniel Galvin promise salon style locks

Daniel Galvin are launching a haircare range in October which claims to provide a salon professional finish without a complicated and time consuming regime.

The range will include: Mild shampoo and Extra care shampoo (£3.25 200ml), Protein conditioner (£3.95 300ml), Conditioning Mist (£3.95 200ml), Frizz Fighter liquid serum (£3.95 50ml), Intensive Hair Repair (sachet £1.45), Thickening mousse (£3.95 200ml) and Hairspray (£2.95 200ml).

There is also a freephone advice line with the range direct to the Daniel Galvin salon. Support for the launch includes an intensive PR campaign. **Daniel Galvin. Tel: 071-486 9661.**

RoC's revitalising night time complex

RoC are launching New Revitalising Night Cream this month containing a chrono-energising complex, said to act in harmony with the skin's nocturnal biorhythms.

The chrono-energising complex contains glycogen to encourage cell oxygenation, a vitamin C derivative for production of collagen, provitamin B5 for cell renewal and

methylsilanol-mannuronate which reinforces the network of collagen and elastin fibres.

The product is hypo-allergenic, non-comedogenic and unperfumed.

It retails at £14.95 for 40ml and the launch will be supported with a counter merchandiser and sampling. **Laboratoires RoC. Tel: 0372 749223.**



Oragard is Colgate's sore mouth solution

Colgate-Palmolive are launching a gel indicated for mouth ulcers and other sore mouth conditions.

Oragard can also be used for temporary denture discomfort and for relief from teething pain.

Oragard is a sugar-free, clear antiseptic gel containing lignocaine hydrochloride 0.6 per cent w/w and cetylpyridinium chloride 0.2 per cent w/w.

Recommended dosage for infants and babies: a pea-sized amount to be rubbed into gums, which can be repeated after 20 minutes if necessary. No more than six doses to be used in 24 hours. For older children and adults it should be applied to the affected area every three hours as necessary.

Colgate-Palmolive. Tel: 0483 302222.

Freshmint variant for Remegel

Warner-Lambert are extending their Remegel range with the addition of a freshmint variant.

Remegel Original now accounts for 12.7 per cent of the £38.4 million market, according to the company, and has contributed 11 per cent to sterling growth in the market since launch.

The new variant contains 800mg calcium

carbonate per piece in a chewy base and is presented in eights (£0.63) and 24's (£1.69).

Warner-Lambert will be spending over £2 million on television advertising on an annual basis on the brand. Remegel will appear on TV at peak periods during the rest of 1993 and throughout 1994. **Warner-Lambert Health Care. Tel: 0703 6205000.**

A world first breakthrough in infant formula.

Mother's milk contains special long chain lipids which are known to be important for the early development of a baby's brain and vision. The problem is that bottlefed babies have, up to now, been unable to receive these vital lipids from their infant milk.

But not any more. Because Milupa, Europe's favourite infant milk manufacturer, has achieved a significant breakthrough with the introduction of Milupan.

Milupan is a unique new fat blend, containing these vital long chain lipids, which we have added to our starter infant milk, Aptamil. This makes new Aptamil with Milupan a world first. It's the only infant milk that provides the long chain lipids babies need for early development. What's more, it provides them in a similar quantity and ratio to breastmilk.

So, for mothers who decide to bottlefeed their baby from birth, or just to breastfeed for a short time, new Aptamil with Milupan has to be the obvious choice.

If you want to share in the new future of infant milks, you'd better get your share of new Aptamil with Milupan now. It's available in 450g and 900g tins.

milupa[®]
Experts in
Infant Nutrition.



For more information, contact your representative or ring our Sales Department on 081-573 9966. Milupa Ltd., Milupa House, Uxbridge Road, Hillingdon, Uxbridge, Middlesex UB10 0XU.

IMPORTANT: Breastfeeding is best for a baby. A doctor, midwife, nurse or health visitor should be consulted for any advice needed. If an infant milk is used, it is important for a baby's health that all preparation instructions are followed carefully.

Essential therapy at Potter & Moore

Essentials is a new fragrance range from Potter & Moore which combines aromatherapy with perfume.

With the popularity of aromatherapy forecast to rise 35 per cent to see sales reach £15 million this year, Essentials uses essential oils to produce four fragrance "therapies", each aimed at producing a mood enhancing effect.

Essentials Refreshing blends bergamot and lemon oils with rosemary and petitgrain to stimulate the senses.

Soothing comprises mandarin, orange, lemon and elemi oils with warm and musky undertones.

Calming uses patchouli, ylang ylang, oakmoss and tarragon for their anti-stress properties.

Revitalising combines mandarin and lemon with lavender and basil to invigorate.

Each frosted glass 50ml bottle is colour coded to match the mood of the fragrance.

There is no outer packaging, allowing each



natural pump spray bottle to retail at £5.95.

The range is available from Boots in this month

and will be offered through other outlets later in the year. **Potter & Moore. Tel: 0733 281000.**

Duracell's lithium nirvana

Lithium Photo is a new range of camera batteries from Duracell. Said to boost performance by 15 per cent, Duracell hope that by replacing the existing range, Lithium XL, they can increase their 80 per cent share of the lithium battery market.

All batteries are available in cases of five with a ten year storage life: DL123A (£6.99 retail), this size is used in 34 per cent of new cameras; DL223A (£12.99); DL245 (£12.99); PX28L (£8.99); and DL1/3N (£4.25). **Duracell UK. Tel: 0293 517527.**

Ton Sur Ton move into fragrance market

The Paris-based clothing range Ton Sur Ton is branching out into the fragrance market this month.

They have licensed the Perfumery Marketing Company to produce an "oceanic" female perfume.

With top notes of peach and melon; undertones of rose, jasmine and orris; and a base of vetiver and musk, the fragrance came first in a blind testing by

under 18s.

Packaged in a distinctive purple and blue triangular carton, the eau de toilette spray comes in three sizes 7.5ml (£3.95), 15ml (£6.95) and 30ml (£9.95). A body mist is also available at £3.95 for 150ml. It will be distributed through Boots and selected pharmacies. **Perfumery Marketing Company. Tel: 0702 436800.**

Luscious lips with Rimmel

Rimmel have introduced two products which will provide a protective base for lips and ensure lipstick lasts longer.

Conditioning Lip Base (£2.99) is applied to lips before lipstick. It will help minimise lines and prevent feathering of lipstick, say Rimmel.

Lipstick Lock (£2.99) will help give staying power to lipstick when brushed on over the top. **Rimmel Intl. Tel: 0233 625076.**

Toilet tissue offer

Numark are running a "three for the price of two" offer on their own brand toilet tissue during September.

The normal price is £0.72 per pack but under the promotion the consumer can purchase three packs for £1.44, an effective price per pack of £0.48, giving retailers a POR of 27 per cent.

The offer is available on all shades and is supported by a shelf card. **Numark. Tel: 0827 69269.**

Routinely

Simple constipation and other simple bowel irregularities are such a routine part of your workload, you need a treatment you can turn to regularly and routinely.

Turn to Fybogel Orange, routinely.

Fybogel Pharmacy Prescribing Information Indications: Conditions requiring a high fibre regimen, eg relief of constipation and maintenance of regularity **Dosage and Administration:** (To be taken in water) Adults and children over 12 One sachet morning and evening. Children 6-12 years: Half to one level 5ml spoonful depending on age and size, morning and evening. Children under 6 years: To be taken only on medical advice. **Contra-indications, Warning, etc.:** Fybogel is contra-indicated in cases

Fybogel Orange

Ispaghula Husk BP

Regular as clockwork

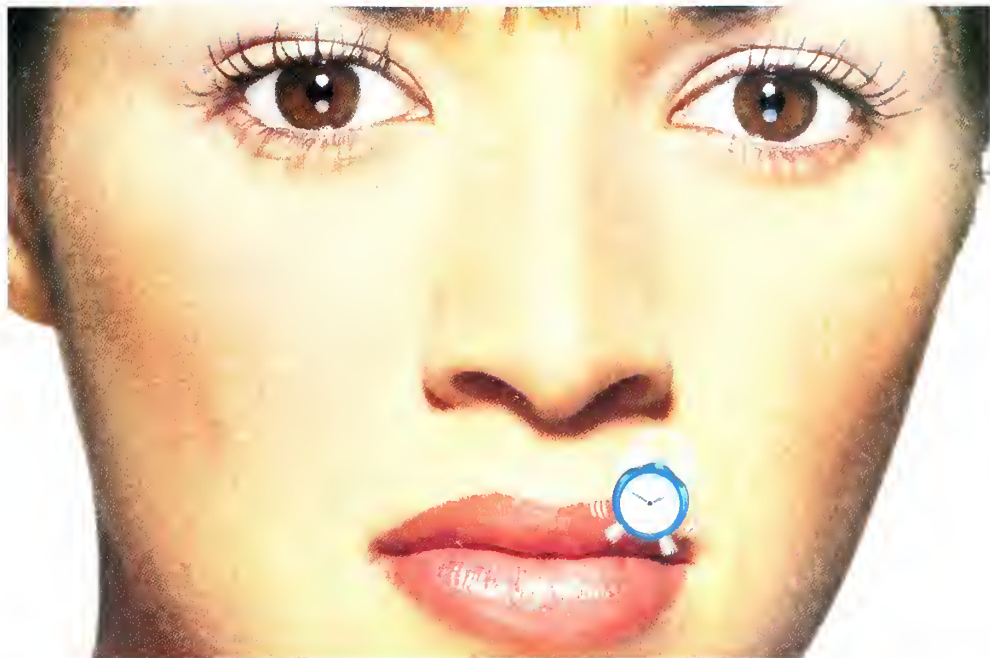
Ⓢ Reckitt & Colman Products Limited

of intestinal obstruction and colonic atony. Each sachet contains 3.5g Ispaghula husk BP and also contains aspartame. **Legal Category:** GSL. **RSP Price:** At Jan '93 10 Sachets £1.25. **PL No.:** Fybogel 0044/0041. Fybogel Orange 0044/0068. Reckitt & Colman Products Ltd, Hull, HU8 7DS, from whom further information is available. Fybogel, Fybogel Orange, and the sword and circle are trademarks of Reckitt & Colman Products Ltd. Date of preparation: 13/07/1993.

Chemist & Druggist 4 SEPTEMBER 1993

COLD SORES?

A MAJOR BREAKTHROUGH



Treating the tingle can prevent a cold sore



ZOVIRAX[®]

COLD SORE CREAM

Early use can prevent a cold sore

ZOVIRAX COLD SORE CREAM: Acyclovir. Essential information. **Presentation** 5% w/w acyclovir in water miscible cream base. **Uses** Cold Sore treatment **Dosage and administration** Apply 5 times a day for 5 days. It is important to start treatment as early as possible after the start of an infection, ideally during the tingle phase. If healing has not occurred, treatment may be continued for up to an additional 5 days. **Contra-indications, warnings, etc.** **Contra-indications:** Zovirax Cold Sore Cream is contra-indicated in patients known to be hypersensitive to acyclovir or any of the excipients. **Warnings:** Do not use if you are allergic to acyclovir or any of the excipients. **Precautions:** Zovirax Cold Sore Cream should only be used on cold sores on the lips and face. Do not apply inside the mouth or in the eye. Do not use for herpes infections of the eye or genital area. Do not use if the patient is under the care of a doctor because of a weak immune system. **Side- and adverse-effects:** Transient burning or stinging may follow application. Flaking or flaking of the skin has occurred in about 5% of patients. Erythema, itching and contact dermatitis has been reported rarely following application. **Retail Selling Price** - subject to Retail Price Maintenance: 2g tube - £4.99 (PL 3/0304) **Legal category** P. Further information available on request: Wellcome Medical Division The Wellcome Foundation Limited, Crayke, North Yorkshire YO6 2RA, UK. Date of preparation: 11/5/93. **Trade Mark**

Christmas offerings from Yardley

Yardley are pushing the boat out this year with a wide range of gift items.

For **Lace**, an embossed 25ml bottle of cologne in a silver finish photo frame comes in a blue display box (£8.95). Packaged in blue oval boxes are 25ml cologne and 100g talc (£8.95); 15ml cologne and two pleated wrapped soaps (£6.95); and 15ml cologne (£4.50).

For the woman who likes **Panache**, a 25ml parfum de toilette spray and accompanying pen (£8.95) is matched by a 15ml PDT and a cosmetic purse in navy (£6.45).

Celebrating its 60th birthday, **Tweed** is being offered in two gift sets. A 25ml parfum de toilette spray comes with pot pourri (£8.95) and in a box presentation with a book, *Scented Gifts* by Valerie Janitch (£9.95). A duopack of 15ml PDT and 100g talc costs £7.95.

The **Forever** range offers a 25ml PDT with an address book (£6.50) or a personal organiser (£9.95). Additionally, there is a duo gift pack of 25ml PDT and 100ml talc (£9.50).

Four gift ideas come from **White Satin**. A 25ml PDT spray comes with a

satin jewellery pouch (£9.45), while a trio is made up of a 15ml PDT, 100ml body lotion and 12 bath pearls (£8.50).

Two PDTs come in one gift box — **White Satin** and **Nights in White Satin** (each 15ml £7.95), while 25ml PDT and 100g talc duo (£9.50) complete the range.

Yardley's **Fleur** fragrance is offered in three variations. A mirror comes with the 25ml PDT (£9.50), while a 15ml PDT, 50g talc and 100g bath oil trio comes in at £10.95. A 25ml PDT and 100g talc duo is £9.45.

For **Yardley Blazer** there are two gift lines. A travel bag in the Blazer livery is filled with a 25ml aftershave and 150ml bodyspray (£9.95), while a 100ml eau de toilette and 100g soap in a traveller costs £14.95.

Yardley Gold is offering a travel bag in burgundy and green with 125ml aftershave, 50ml shower gel and 30g talc (£9.95). Two duo packs — 150ml body spray and 150ml shower gel (£5.95), and 75ml aftershave and 100g talc (£7.95) — are available.

The gift lines for the **Apson** fragrance comprise 118ml cologne

in a green and gold drum with a matching green wallet (£14.95), and a drum with 30ml aftershave and 150ml shower gel (£9.95).

Two packs also make up the **Yardley Original** selection. A 100ml EDT is matched with a wood handled razor (£19.50), while a travel bag is offered with 50ml aftershave and 150ml shower gel. A 30ml EDT comes with a 150ml creme shave for £12.50. **Yardley Lenthery Group**. Tel: 0268 522711.

Ibuleve back on the box

Ibuleve is being advertised on television this Autumn to reinforce the "Pain without Pills" message.

The £2 million campaign will focus on regular and spasmodic pain sufferers and will emphasise Ibuleve's strength and ease of use.

Dendron are also supporting Ibuleve with consumer and professional Press advertising. **Dendron**. Tel: 0923 229251.

Legacy

Pretty Polly are spending £4 million on promoting their Legacy brand this Autumn, with a new television advertisement which breaks in October. The Nylons brand will also be supported with television and Press advertising. **Pretty Polly**. Tel: 0623 552500.

Syndol support

Syndol is being supported by a Press campaign designed to attract new users. A re-run of last year's advertisement, it will feature in women's and health magazines until December. Point of sale material is available. **Marion Merrell Dow**. Tel: 081-848 3456.

Aquafresh ads

Aquafresh toothpaste gets television coverage in a new £1.2 million campaign running until the end of September. **Smithkline Beecham**. Tel: 081-560 5151.

Precise details

The Precise one-minute pregnancy test from Becton Dickinson is capable of detecting human chorionic gonadotrophin (hCG) levels as low as 25mIU and not 25IU as stated last week. On the first day of a missed period, hCG levels are approximately 100mIU/ml in the morning, falling to about 30mIU in the afternoon. **Becton Dickinson**. Tel: 0865 748844.

Escada for new men

Escada pour homme is a new fragrance from Margaretha Ley, described as a fresh oriental, combining warmth with crisp, clear notes.

Top notes mix bergamot, mandarin, lemon italia, lie de vin and thyme; heart notes include cardamon, clary sage, the geranium and black pepper; base notes combine amber, sandalwood, patchouli and

vanilla.

The fragrance is available as eau de parfum spray (125ml £55); eau de toilette spray (125ml £45; 75ml £28); EDT flacon (75ml £27.50); aftershave (75ml £21; 125ml £30); bath & shower gel (200ml £17.50) and doedorant stick (75g £12.50). The range is available to all Escada stockists. **Kenneth Green Associates**. Tel: 0372 469222.

At last, combing out lice eggs needn't end in tears

New Step2, offers for the first time, a way of avoiding the hours of painful combing associated with lice egg and nit removal.

An infestation of head lice is easily cured. Any proprietary pediculicide will kill the lice and their eggs. It is after treatment however, that the problems really start.

The next step is to completely eradicate all traces of infestation by meticulously combing out the lice eggs and nits. This process is painful, distressing, and can take many hours.

Now, there is a specialist lice egg removal system which pharmacists can recommend for use after any pediculicide treatment. Step2.

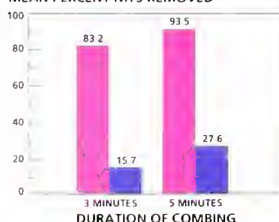
New Step2 is a creme rinse which greatly speeds the lice egg and nit removal process by loosening the bonds which hold them firmly to the hair.

Studies have shown that the combing process can be made up to 10 times faster with Step2. Step2 helps to reduce tangling, making combing less painful and far more effective.

New Step2 also reconditions treated hair, restoring its health and shine.

Killing the lice is only the first step in head lice treatment. Now you can finish the job with Step2.

MEAN PERCENT NITS REMOVED



NEW
LICE EGG REMOVAL SYSTEM



Step2 takes the tears out of lice egg removal

Note: Step2 does not kill lice or their eggs, but speeds the removal of the lice eggs and nits which remain in the hair.

NEW
3 DAY
START
PACK

NICORETTE®
Patch 15mg
30 cm² nicotine (0mg) releasing 15mg

NICORETTE®
Patch 15mg
30 cm² nicotine (0mg) releasing 15mg

NICORETTE®
Patch 15mg
30 cm² patch contains nicotine 0.83 mg (Once daily releasing 15 mg)

NICORETTE®
Patch 15mg
HELPS YOU GIVE UP SMOKING

3 Day
Pack

Now Nicorette® makes it easier to start stopping

Nicorette® - the world leader in smoking cessation - introduce Britain's first 3 Day Start Pack. To help more smokers than ever discover the benefits of Nicorette® Patch.

Over 90% of smokers are aware of Nicorette® Patch¹. 65% are interested in trying it². But up to now, not all of that interest has been converted into actual purchases. One reason for this is perceived cost. Although each patch only costs about the same as a packet of cigarettes, paying for seven or more at once can put a lot of people off.

Now new Nicorette® 3 Day Start Pack answers the problem! You can't recommend a more inexpensive introduction to the benefits of a nicotine patch. And your customers can't buy a more effective nicotine patch.

NICORETTE®
*You can't recommend a
more effective nicotine patch*

Ref 1: Millward Brown, June 1993
Ref 2: Millward Brown, April 1993

Abbreviated prescribing information

Nicorette® Patch 15 mg, 10 mg and 5 mg. Presentation: Transdermal delivery system available in sizes (30, 20 and 10 cm²) releasing 15 mg, 10 mg and 5 mg of nicotine respectively over 16 hours. **Indications:** Treatment of nicotine dependence, relief of withdrawal symptoms associated with smoking cessation. **Dosage and Administration:** Nicorette® Patch should not be used concurrently with other nicotine products and patients must stop smoking completely when starting treatment. The recommended treatment programme should occupy 3 months. One Nicorette® Patch should be applied to a dry, non-hairy area of skin on the hip, upper arm or chest in the morning and removed at bedtime. Application should be limited to 16 hours within any 24 hour period. Patients are recommended to commence with one 15 mg patch daily for the first 8 weeks. Patients who have remained abstinent should then be supported through a weaning period, consisting of one 10 mg patch daily for 2 weeks followed by one 5 mg patch daily for a further 2 weeks. Patients should be reviewed at 3 months and if abstinence has not been achieved, further courses of treatment may be recommended if it is considered that the patient would benefit. **Contra-indications, Warnings etc.:** Contra-indications - Non smokers, children under 18 years, pregnancy, lactation, known hypersensitivity to nicotine or component of patch.

Precautions: History of angina, recent myocardial infarction or cerebrovascular accident, serious cardiac arrhythmias, systemic hypertension or peripheral vascular disease, history of peptic ulcer, diabetes mellitus, hyperthyroidism, pheochromocytoma, chronic generalised dermatological disorders. **Warnings:** Erythema may occur. If severe or persistent discontinue treatment. **Drug Interactions:** See full data sheet. **Side-effects:** Application site reactions (e.g. erythema and itching), headache, dizziness, nausea, palpitations, dyspepsia and myalgia. Other subjective sensations associated with smoking cessation or nicotine administered by smoking may occur. **Legal Category:** P. **Package quantities:** Cartons containing Nicorette® Patches in single sachets in the following quantities: Nicorette® Patch 15 mg (PL 0022/0105) - packs of 3 (£4.99), packs of 7 (£9.07) and 28 (£36.28). Nicorette® Patch 10 mg (PL 0022/0104) - packs of 7 (£8.36). Nicorette® Patch 5 mg (PL 0022/0103) - packs of 7 (£7.20). **Full prescribing information available on request from:** Kabi Pharmacia Ltd., Davy Avenue, Knowlhill, Milton Keynes, Buckinghamshire, MK5 8PH. Date of preparation June 1993.



Kabi Pharmacia

Endocil relaunched as skin supplements

Chefaro Proprietaries are relaunching their Endocil brand with a range of skincare supplements targeted at women aged 40 plus and positioned in the growing premium mass market sector.

The original Endocil Moisturising Beauty Cream is being retained and a new range of five skin supplements have been introduced around this core product. All are lanolin-free and have not been tested on animals.

The five products are: Active Moisturising Lotion (£3.95), a day-long moisturiser containing UVA and UVB sunscreens and vitamin E. It is recommended for daily use after cleansing. Hydro Replenishment Eye Gel (£3.75) is formulated as a cream gel and also contains vitamin E.

There is also a Rich Protective Hand Cream (£2.75), designed to be applied morning and night and after any drying activity. Gentle Cream Wash (£3.45) is a combination of soap-free cleansers with natural moisturisers, suitable for all skin types.

The fifth new product is Age Spot Fading Formula (£8.95) said to help fade age spots, freckles and other pigmentation marks without the use of the bleaching agent hydroquinone. Its active ingredient is natural beta-carotene contained in nano-collaspheres, says the company. This product also contains sun filters.

Endocil Moisturising Beauty Cream remains available in a 100g pot and a 40g tube but has been repackaged. Trade support will include a pre-packed



counter display unit with show card. The launch will be accompanied by a targeted £250,000 advertising and promotion campaign in the trade and consumer media.

"We are confident that the trade will welcome the launch of the new Endocil Skin Supplements range," says product manager Diane Burns. "According to recent research, older

women are interested in fashion, beauty and grooming but feel that High Street shops cater inadequately for their needs and preferences. The most loyal customers of independent pharmacists are the over 40s and Endocil Skin Supplements are designed to meet their skincare needs." **Chefaro Proprietaries. Tel: 0223 420956.**

Numark baby relaunch

Numark are supporting the relaunch of their baby toiletries range with a promotion running until the end of the month.

Consumers can select any two products for £1.50, choosing from: oil, £1.09; lotion, £0.89; bath, £0.99; or shampoo, £0.89. Numark pharmacies will be offered these lines at £2.75 for an outer of six, giving a POR of 28 per cent. Point of sale material in the form of posters, shelf strips and bags are available. **Numark. Tel: 0827 69269.**

Flawless finish

High Definition Liquid Foundation has been re-formulated by Max Factor and is being relaunched in October.

The re-formulation offers a better, more natural semi-matt finish, say Max Factor.

It is available in four shades: Perfect Ivory, Soft Beige, Natural Beige and Natural Tan.

The foundation comes in an easy to use tube with a reduced price of £4.99 for a larger 40ml size.

Procter & Gamble (Cosmetics and Fragrances). Tel: 081-568 4333.



Dendron are introducing a pharmacy support pack for Blistez. It includes a tear-off pad of consumer information leaflets — the "Crucial Guide to Cold Sores and Sore Cracked Lips" with each leaflet offering a free Blistez Smiley money bag, a quick reference summary of facts on cold sores and cracked lips and a signature board for pharmacists. **Tel: 0923 229251**

On TV Next Week

GTV Grampian	C4 Channel 4	STV Scotland (central)
B Border	U Ulster	Y Yorkshire
BSkyB British Sky	G Granada	HTV Wales & West
Broadcasting	A Anglia	M Meridian
C Central	CAR Carlton	TT Tyne Tees
CTV Channel Islands	GMTV Breakfast	W Westcountry
LWT London Weekend	Television	

Andrews Antacid:	All areas except U, CTV
Aquafresh:	All areas
Aspro Clear:	L, C, A, M, HTV, U
Colgate Total:	All areas
Nytol:	G, TT, Y
Radian-B:	G, Y, C,
Rap-eze:	All areas except CTV
Remegel:	All areas except GMTV
Sensodyne:	All areas except G, Y, CTV, CAR
Setlers:	All areas
Setlers Tums:	All areas
Slim-Fast:	All areas
Solpadeine:	All areas except U, CTV, TVS, LWT, TTV, C4, GMTV
Sure Sensitive:	All areas except U, CTV, L
Wasp-eze	C4
Wrigley's Extra & Orbit:	All areas
Zovirax:	G, M

Dispense Wyeth Temazepam Tablets on open scripts for temazepam

WYETH GENERICS HOTLINE 0628 414792

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FOR FURTHER INFORMATION REFER TO DATA SHEET OR CONTACT WYETH LABORATORIES, TAPLOW, MAIDENHEAD, BERKS.

*TRADEMARK

Get Fresh with Colgate soap

Fresh, the deodorising soap from Colgate-Palmolive is being relaunched with a new fragrance, shape and packaging this month.

Fresh's new shape is saddleback in design, making it easier to use. The colour of the soap has been lightened.

Fresh will be available in two variants Fresh Blue and Fresh Green priced at £0.39 for a single bar and £1.39 for a four bar pack. Colgate-Palmolive. Tel: 0483 302222.



Gladiators fight plaque

Television's Gladiators are helping to keep children's teeth clean as the latest Wisdom introduction to the £7 million character toothbrush market.

The Gladiators were chosen after research among 7-10 year olds which showed a 97 per cent awareness of the characters.

The brushes are targeted at the younger end of the market and are available in red, blue, yellow and green

with dual colour bristles. Each toothbrush retails at £1.49 and carries the slogan "Fight plaque with Gladiators" on the packaging. Addis. Tel: 0992 584221.

Cannon fires Autumn offers

Cannon Babysafe are offering pharmacists discounts on their two feeding ranges until the end of October.

The Cannon Babysafe range gives special offers on the Sealable Travel Trainer Cup (six for the price of five) and Newborn Bottle and Teat Dispenser (10 per cent discount on normal trade price).

In addition, for packs of 12 single mealtime and weekly bibs, pharmacists will be charged for the price of nine and packs of 12 rattle teethers are at the price of ten.

Consumers purchasing Cannon Babysafe's Disposable Breast Pads will get three packs for the price of two.

On Cannon Babysafe's Avent range retailers purchasing two of the single handed breast pumps will receive a free Avent Breast Milk Storage System. Those purchasing stock boxes of the slow, medium and fast flow silicone teats will receive a free box of the variable flow teat.

The new born, plain, designs and night time soothers ranges are on offer at the price of seven packs, rather than eight.

Finally, both 4oz and 9oz Avent bottles will feature a free weaning spoon on pack. Cannon Babysafe. Tel: 0787 280191.

TRADE ANNOUNCEMENT

CALPOL* PRESCRIPTIONS IMPORTANT POINTS TO REMEMBER.

To comply with a recent reimbursement decision Calpol prescriptions should in future read:

Calpol Paediatric
and where appropriate

Calpol Paediatric Sugar Free

If in receipt of a prescription for Calpol Infant Suspension, please contact the issuing GP for clarification.

New one-litre dispensing packs will be available shortly, meanwhile you may continue to dispense from existing stock as formulations and dosages are unaffected.

These name changes do not affect Calpol OTC packs.

If you require further information, please telephone the Wellcome Medical Dept. on 0270 583151 or write to:
The Wellcome Foundation Ltd.
Crewe Hall, Crewe, Cheshire, CW1 1UB.



Wellcome

* Trade Mark

Nytol's TV first

Nytol is the first clinically-proven sleeping aid to be advertised on television, say makers Stafford-Miller, in a campaign running until the end of September.

Pharmacy support comes in the form of point of sale display material and consumer leaflets available on request from: Stafford-Miller. Tel: 0707 331001.

Boots hope Council will reconsider Wimborne decision

The situation at Wimborne (*C&D* August 28 p320) is that a collection and delivery service has been provided by the Boots the Chemist store and another local pharmacy for several years to a small number of patients, mostly elderly and with limited mobility who live in the nearby village of Colehill. A recent survey found that the average age of patients using this service is 73 years.

The opening of a pharmacy at Colehill, albeit some distance from the collection point, has given these patients the choice of taking their prescriptions to the pharmacy, continuing to use the collection service or some combination of these to suit their individual needs.

We have received a letter from the head of the Law Department at the Royal Pharmaceutical Society of Great Britain drawing our attention to the recent Council decision. We have responded by setting out the facts of the situation and expressing our strongly held view that the continued operation of the collection point is not unethical.

Its discontinuation would be clearly against the interests and wishes of current users and

impose a wholly unnecessary limitation on patients' choice.

We hope that the Council will reconsider their decision in the light of the information we have now provided.

Martin Wakeling
Head of corporate affairs
The Boots Company

Community practice through the decade

The computerised side of pharmacy has taken great steps within the past ten years, and in the next seven years, more advances could occur.

By the year 2000 each pharmacy should purchase entry into a central computer system, constantly updated when medication is prescribed, and containing details of all patients within an area, for example a health authority.

This system will work for anyone who walks into a pharmacy with a prescription. The problem with the current PMR system is that it only works for regular patients of a pharmacy.

I also suggest the installation of a fax-type machine in each pharmacy and general practice.

This would save time on phone calls when prescriptions need to be phoned through, leaving the telephone free. Errors, which could occur by people mis-hearing drug names, would be eliminated, benefiting patients by minimising the possibility of a wrong prescription.

My final proposal is more for the patient's benefit. As more prescriptions are computerised, it would make sense to develop machines capable of reading the prescription and printing the required information on a label. This would save time, prevent errors and allow the pharmacist more time to spend with the customer.

The three key points the Society would need to pursue, are: talks with pharmacists, doctors and computer specialists; promoting the principle that the service would be cost-effective; and to increase communications between doctors and pharmacists.

Iain Drewery
N. Humberside

Another tonic for Tesco

This is to make my fellow pharmacists aware of a new product being put on the shelves of Tesco as a GSL product. Effic Tonic is going on shelf because pharmacists did not support it enough, according to my sales representative.

What next?

B.V.Lakhani
Luton

I used to do good business with Elida Gibbs!

What has happened to Elida Gibbs? I used to do good business with them when their representative called every eight weeks and the stock was delivered direct.

Under the new system, which came into effect last September, we are only allowed to order a few lines each month. These

goods take ages to arrive or are cancelled. I failed to receive trial sizes of Impulse or Harmony, though these were freely available in Boots and Superdrug. Lynx body spray was available in January, but not in August. I am still waiting delivery of Impulse ordered three weeks ago. I have not been offered toothpaste all year.

I am selling a fraction of goods I used to from Elida Gibbs and it appears they are no longer interested in independent pharmacists. If this is the case, why bother to call? They could then save even more money by making the representatives redundant!

Thankfully, not all companies feel this way and are eager to fill the independent's shelves left empty by Elida Gibbs. Come on Elida Gibbs, you can do better! Start off by admitting this system is a disaster and change back to the method used before.

T. Seabourne
Launceston

Ian Pritchard, trade communications manager for Elida Gibbs, responds: We are sorry to hear of Mr Seabourne's problems with our chemist Focus activities, and the service from his wholesaler.

To reply in detail would require consultation with the wholesaler, but we can assure him that the prime objective of Focus is for improved service to independent chemists.

We now call on 4,000 independent chemists against 1,500 previously, an indication of how committed we are to supporting independents.

We are working closely with chemist wholesalers to provide a quality service with the aim of offering competitive prices and margins on our key brands, plus introductory deals on new products, supplemented by merchandising aids.

Naturally we cannot say we have not experienced problems. However, we are confident that, together with wholesalers, we can create all the support systems to give chemists the best of service from Elida Gibbs via their nominated wholesaler.

Much appreciated support

May I, through your columns, express my thanks to the pharmacists, their staff and relatives for the kindness and support that I received while involved in the campaign for the Christchurch By-election. Their positive encouragement and hospitality was very much appreciated and contributed to a substantial achievement in publicising our case.

We were able to bring many

important matters to the attention of the major candidates, particularly Mrs Diana Maddocks, to whom I extend my congratulations. I am pleased to confirm that she is now extremely sympathetic to the problems facing small community pharmacies.

Peter Hollyman
Porthmadog

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0041	GS110-12	1.57	1.44	1.08	2.39
0025	GS135-12	2.05	1.89	1.42	2.89
0027	GS135-24	2.61	2.40	1.98	3.69
0049	GT135-36	3.46	3.18	2.39	4.89

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0045	CX135-36	3.12	2.87	2.30	4.39

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	24 SHOTS FREE				
0108	GS200 135 TWIN	5.22	4.80	4.18	7.38
0039	GS135-36	2.65	2.44	2.12	3.74
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Questions and Answers

This prescription looks deceptively simple but as with anything listed in the Drug Tariff there are hidden pitfalls. The Pharmaceutical Services Negotiating Committee explains where you could go wrong

Address

Pharmacy Stamp

Pharmacist's pack and quantity endorsement	No of days treatment N.B. Ensure dose is stated	NP	Pricing Office use only
--	--	----	-------------------------

2x28 disp

R/ Caps Penbritin 250mg
1 QDS
M 56

Signature of Doctor

Date

IMPORTANT Read notes overleaf before going to the chemist

Form FP10 (Wales) (Rev 12/77)

Q

1. Will the endorsement be accepted by the Prescription Pricing Authority?
2. This item has a common pack. Will this have an effect on the pricing of this prescription?
3. How else could this prescription have been dispensed?

A

1. The endorsement will be accepted by the PPA?
2. The common pack for this item is the 100 pack, listed in Part VIII of the Drug Tariff. This pack will only be used to price the prescription if the pharmacist had not endorsed a pack size.
3. This prescription could also have been dispensed by using the 100 or 500 pack.

An extended role in residential homes

The previous article in this series explained the social background and problems facing an increasingly elderly population in the UK. Because of the associated healthcare implications, pharmaceutical care aimed at elderly populations is an important and routine part of a pharmacist's work.

In 1984, a working party set up by the Royal Pharmaceutical Society established that there was a need for detailed advice on the "administration and control of medication in residential homes". The advisory role of the pharmacist on the safe use and storage of medicines has been acknowledged, and the Society has produced two reports which describe this role.

Advisory role

Many community pharmacists, as well as supplying medication, are now being asked to undertake an advisory role within the homes they supply. They must first complete a comprehensive and detailed training package. To maintain the contract and receive payment for this service, they must visit the homes regularly and make written reports of the advice given.

Standards

Documentation, which outlined the pharmaceutical services that were to be provided in the residential homes in each area, was adopted by the FHSAs. Summaries of the standards of services, appropriate and safe systems of administering the medicines and the provision of an advisory service were laid down.

The need for increased pharmaceutical input into the residential homes was identified to increase the standards of care to residents. It was also intended to assist community pharmacists in assessing the commitment and facilities required when offering a pharmaceutical service to the home.

Supply

The system for collection of repeat prescriptions and the delivery of dispensed medicines to the home is set up by the individual pharmacist and the officer-in-charge of the residential home. The pharmacist communicates any problems with the repeat prescriptions to the prescribing doctor, thus enabling a system of medicine review to be implemented.

If any residents require urgent prescriptions for antibiotics, the pharmacist does not usually have to supply these in monitored dose systems. The system for medicines



Picture courtesy of Surgichem

In the second of a two-part series on increased pharmaceutical care in residential homes, Catherine Duggan and Ian Bates of the Centre for Pharmacy Practice, School of Pharmacy, London, discuss the extended roles of the pharmacist in the context of service provision to residential homes

administration and packaging may differ from home to home. The choice of system to be used will be made by the management of the home, usually in consultation.

Monitored dosage

All solid dose forms are placed into the monitored dosage bubble packs, if the home is using a monitored dosage

system. Antibiotics can be supplied in traditional containers. The pharmacist is required to inform the home and to instruct the officer-in-charge that the medicines are for short-term use.

Each blister pack is a month's supply of a single dose of medicine. If the dose is "one tablet twice daily", the two blisters are supplied for the

A pharmacist using the Littlefoot portable computer from Community Computers to update patient records on site in a nursing home.

same medicine, each labelled with the name of the medicine and the time of administration. If the dose requires

Continued on p11

Continued from p1

modification, the pharmacist should be able to respond — i.e. if half tablets are required at each dose interval, then half tablets should be supplied.

The pharmacist is allowed to dispense in traditional containers if the home requires medicines to be supplied in that way, or if there are short-stay patients and a month's supply may well be excessive and cause confusion and wastage of medicines.

Administration

The pharmacist must use professional judgment when assigning the appropriate administration time of the medicines and, if necessary, should be able to liaise with the doctor or the care officer to ascertain the most convenient time of administration.

Vague instruction labelling should be avoided; labels such as "take as before" are unsatisfactory and potentially dangerous in most cases.

There are guidelines specifying the time between the collection of the prescriptions and the dispensing of medicines (usually five working days), but this can remain flexible, and the pharmacist should remain willing to provide emergency supplies, extra supplies and antibiotics where appropriate.

The aim is for the pharmacist to be perceived as a professional who is willing to help with the smooth and effective running of the home.

Monitoring

The pharmacist is advised to visit the home under contract at least once a month and engage in the provision of healthcare advice. The home records have to be checked on these visits, to ensure that the information is correct, the medication is appropriate and that there are no overdoses or drug interactions to the medicines prescribed.

The storage of medicines is an area which the pharmacist can assist the carers. For instance, residential homes are generally well heated, particularly those for the elderly who, because they are immobile, require the temperatures to be higher. In addition, medicines need to be stored as near to the point of administration as possible so they may be stored where the residents and relatives have access. Advice and consultation on the compromise of convenience and potential hazards is needed.

Some residents may wish to retain their own medicines and this should be allowed as much as possible as it encourages independence.

The advice that a pharmacist is required to give to the care staff and officers in charge of the home is dependent to a certain extent on the individual. There are many guidelines as to the approach, content and styles of presentation; these are of great help to the pharmacist and can be implemented where

appropriate to the home's needs and requirements.

The pharmacist should alleviate any worries or doubts that staff have about administering medicines to residents. They often think that they will be blamed if the resident suffers an adverse reaction or side-effect from a drug. It may be important for the pharmacist to emphasise that anyone can administer a medicine which has been legally prescribed for a patient, given appropriate education and training. Equally it is important to emphasise that drugs are a resident's property and cannot be given to another.

The pharmacist can also explain the right of choice of a resident to look after his or her own medicine or to refuse to take it. It is the responsibility of the care staff to exercise a "duty of care" towards the residents, helping to make the decisions for themselves.

Alternatives

In some situations, staff may be very keen for residents to use alternative, homoeopathic or herbal remedies. This may well be instigated by the residents themselves, who may believe that the alternative remedies are, at least, harmless and, at best, very efficacious.

Media reports of "natural is best", together with the cultural influences of family and friends, have brought about an increase in the use of such therapies. The pharmacist should be able to address any issues concerning the use of alternative remedies. This includes identifying any possible interactions with prescribed medicines which may produce harmful side-effects, and any advice on the efficacy and choice of alternative remedy.

Homely remedies

Some staff have been known to think the dose of a medicine is too high or too low for a resident and take it upon themselves to alter the dose. The pharmacist needs to be aware of this, and to emphasise that alterations to prescribed medication can occur only with the prescriber's consent.

This can be extended to explain the fact that no medicines can be given to a resident unless they have been prescribed. The pharmacist must then explain the legality of giving patients "homely remedies", which are not prescribed, but are bought from the contracting pharmacy.

The idea behind homely remedies is that a resident's independence can be increased substantially if responsibility for their wellbeing is self-governed. This then means that a resident can ask for a "headache tablet" or "something for my tummy", the request will be taken seriously and the home has medicaments to alleviate the symptoms.

The pharmacist will have liaised with the officer-in-charge, and decided on the most appropriate supply of OTC

medicines for the home. The administration of the homely remedy will be recorded so that any worsening of symptoms can be noted.

Responsibilities

The staff of the home need to be made aware of the role of the pharmacist as a healthcare professional and as a member of this team.

It is the responsibility of the pharmacist to ensure as far as possible that the patient receives the correct medicine in the correct dose and form at the correct time, in the correct way. In practical terms, this involves an assessment of the prescription to ensure that the medicine is appropriate for the condition for which it is prescribed and that the dose is correct.

The pharmacist needs to check that the patient is not taking any other medicine which may have an effect on the new medicine (i.e. adverse drug combination). If the pharmacist is not satisfied that the medicine is suitable, then he or she will contact the doctor to advise, and to suggest an alternative.

The use of patient medication records is useful for this purpose, especially for those patients on long-term medicines or with mental or physical handicaps.

Home contracts

The implementation of a "pharmaceutical contract" was found to increase the number and diversity of services provided to the residential homes. Studies have attempted to evaluate and appraise the introduction of these locally agreed contracts between the home and community pharmacist.

The services provided by the pharmacist under contract have been compared to those provided by a community pharmacist not under a locally agreed contract. These contracts were, at the time of the studies, under experimentation to enable the extended professional role of the pharmacist to become established.

Providing pharmaceutical care to residential homes is a relatively new extension of the professional role. The clientele of the homes varies considerably, as does the quantity of and quality of pharmaceutical care.

Contract analysis

Analysis of the services provided to homes showed that those which had negotiated contractual agreement with a local community pharmacist had a significantly greater pharmacy input and service provision than those without a contract.

Of the homes studied, 54 per cent had a contract with a local pharmacy and 46 per cent had no contract, although all the homes received a pharmaceutical service from a community pharmacist. The services that were analysed ranged from basic pharmacy

service (e.g. supply and delivery of the medicines), to

- collection of prescriptions
- provision of prepacked unit doses
- visiting the home regularly
- providing advice to the care staff and residents
- renewing OTC and homely remedies
- checking for out of date stock.

The increase in service provision with the introduction of pharmaceutical contracts could be due to the individual pharmacist, as the precise terms of the contract are unspecified. It is likely that the pharmacist may be more self-motivated or the initiation of the contract could be motivating in itself.

The study indicated the need for standardisation and rationalisation of the contract itself, and hence the pharmacy input into all homes. This need for standardisation is illustrated in the implication that client benefits are increased with expanded services.

Communication

Many studies have identified the significance of degenerative diseases in the elderly and have pointed to the importance of communication between carers and patients. Although residential homes for the elderly do not take in clients with acute conditions, many elderly patients suffer slow-progressing forms of degenerative illnesses.

A pharmacist providing pharmaceutical services to a residential home should therefore aim to communicate with the residents as well as care staff to extend their role of healthcare provision. A pharmacist can then be identified as a link with the doctor because many residents may feel that they "shouldn't bother the doctor", or that "they are too busy", and may tell the pharmacist many problems they regard as unimportant or irrelevant.

While this does not detract from the fact that a pharmacist may well be as busy, it provides him or her with a position of trust and enables the pharmacist to communicate difficulties, troubles or symptoms at their discretion.

Opportunity

The role of a community pharmacist in providing services to a residential home for the elderly comprises many skills and activities. It is an ideal opportunity for the pharmacist to extend professional roles and communicate with other healthcare workers to achieve the optimum care for the clients within the residential home.

Reference

- Duggan C., Fry C., Timbrell H., Tompkins M. (1992). "Pharmaceutical Care and Service Provision to Residential Homes", *Pharmaceutical Journal*, 249: R36



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In the first of a two part series, Charlotte Fry, The Centre For Pharmacy Practice School of Pharmacy, University of London reviews recently introduced pharmaceuticals with novel modes of action

A number of pharmaceutical products introduced in the past two years contain compounds with novel pharmacological modes of action.

These products represent major advances in the treatment of diseases such as migraine, schizophrenia, depression and diabetes, and are likely to make a substantial impact on the treatment of these conditions, and on the direction of future research.

Sumatriptan

Imigran (sumatriptan) is produced by Glaxo Laboratories Ltd, and was launched initially as a subcutaneous injection and more recently as Imigran tablets. Both products are licensed for the acute relief of migraine. The injection is also licensed for use in cluster headaches.

Before the introduction of Imigran, the treatment of acute attacks of migraine involved symptomatic relief using analgesics and anti-emetics or the vasoconstrictive ergot alkaloid derivatives such as ergotamine and dihydroergotamine.

The precise aetiology of migraine is not known. It is characterised by cranial vasodilatation which leads to distension and inflammation and 'painful' signals are registered by the trigeminal nerve. 5-hydroxytryptamine (5-HT) is released from body stores during attacks of migraine.

• Mode of action

Sumatriptan is a specific 5-HT₁ agonist, which causes selective vasoconstriction of dilated cranial arteries without reducing blood flow to the brain. The high receptor specificity of sumatriptan means that the peripheral

effects are less than with other vasoconstrictive agents.

• Dosage

The subcutaneous injection is a pre-filled syringe containing 6mg sumatriptan. This is the dose recommended in adults for acute attacks of migraine and cluster headaches. Should symptoms recur, a further dose is permitted after an interval of one hour. The maximum dose in 24 hours is 12mg.

The recommended dose of oral sumatriptan is one 100mg tablet taken as soon as the attack commences. Further doses should not be taken if the attack persists, but patients who respond initially and then experience a recurrence of symptoms may take further doses up to a maximum of 300mg in 24 hours.

Neither preparation is recommended for use in children or the elderly.

Oral bioavailability is quite poor due to first pass metabolism and incomplete absorption. The peak plasma concentration is seen after 90 minutes compared with 10 minutes after subcutaneous injection. This makes the injectable form most appropriate in patients where a rapid onset of action is desirable.

• Subcutaneous

Subcutaneous sumatriptan has been shown in placebo-controlled trials to be effective at terminating migraine attacks in 70 per cent of patients. The oral form is effective in between 50 and 66 per cent of patients two hours after administration. But due to the short half-life of the drug, symptoms often recur within 24 hours of administration.

• Side effects

The adverse reaction profile of the drug shows some



Picture courtesy of Bayer

Drugs with Novel

characteristics of migraine and its recovery period (nausea, vomiting, drowsiness, dizziness and fatigue), but other reported adverse effects include chest pain and tightness. It is not known whether this pain is cardiac in origin, but the use of sumatriptan is contraindicated in patients with ischaemic heart disease.

• Precautions

Transient increases in blood pressure have been reported,

and sumatriptan is not recommended for use in uncontrolled hypertension. It must not be used in conjunction with: monoamine oxidase inhibitors, specific serotonin reuptake inhibitors, lithium or ergotamine, but its use with propranolol, dihydroergotamine or pizotifen is acceptable. Patients should be informed that attacks of migraine unresponsive to sumatriptan

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Glucobay acts by competitively inhibiting the breakdown of non-absorbable complex carbohydrates to absorbable monosaccharides.

treatment of benign prostatic hyperplasia (BPH). This is a condition in which the prostate gland enlarges. It is increasingly common with age and most men over the age of 50 will have some degree of enlargement.

The enlarged prostate gland causes a narrowing of the urethra leading to difficulty in passing urine, hesitancy and terminal dribbling.

Currently, the main therapy for BPH is transurethral resection of the prostate. But this procedure is not without complications and not all patients are able to undergo surgery. The drug is not intended as a replacement for resection of the prostate, but is for use in newly diagnosed patients or where surgery is not, or not yet, appropriate.

• **Mode of action**
Finasteride is an inhibitor of 5-alpha-reductase, an enzyme responsible for the conversion of testosterone to dihydrotestosterone (DHT). DHT is the key androgen in the control of prostatic growth: shrinkage of the hyperplastic tissue occurs when deprived of DHT and this leads to a reduction in size of the prostate gland and a reduction in symptoms.

• **Dosage**
Finasteride is available as 5mg tablets. The dose of 5mg each day may need to be given for at least six months before it is possible to assess if any benefit has been achieved, and thereafter long-term treatment is recommended.

• **Precautions**
Care must be taken before prescribing finasteride to exclude prostatic cancer, as serum levels of prostate-specific antigen, a marker for diagnosis of prostatic cancer, are reduced by finasteride therapy. Other precautions include monitoring of patients with diminished urinary flow to check for obstructive uropathy.

Patients with partners who are, or may become, pregnant should be advised to avoid contact with broken or crushed tablets and the patient's semen, which may contain small amounts of finasteride. It is not known whether a male foetus would be adversely affected when exposed to the semen, but studies have shown foetal abnormalities in rats given doses of finasteride during pregnancy.

Acarbose

Glucobay (acarbose) is a recently launched product from Bayer plc which delays absorption of glucose from the gastrointestinal tract. It is indicated for use in non-insulin dependent (type II) diabetes that is inadequately controlled by diet alone or by diet and hypoglycaemic agents.

• **Mode of action**
Acarbose is a pseudo-tetrasaccharide, a molecule with structural similarity to starch and an inhibitor of the alpha-glucosidase digestive enzyme. The enzyme is present on the microvilli of the jejunum, and its inhibition slows the rate at which carbohydrate is broken down in a dose-dependent manner.

The carbohydrate is not lost but absorbed further along the small intestine, giving a smoother blood glucose profile, preventing post-prandial hyperglycaemia.

Pancreatic insulin production is not increased by acarbose. And, as acarbose gives steadier concentrations of blood glucose, there is a corresponding reduction in post-prandial insulin concentrations, lessening the occurrence of drug-induced hypoglycaemias.

• **Dosage**
The initial dose in adults is 50mg three times a day; this should be taken immediately before a meal with liquid, and the dose is then titrated to response up to a maximum of 200mg three times a day.

• **Side effects**

Continued on pvi

Modes of Action

may be treated with non-steroidal anti-inflammatory drugs.

• Cost considerations

Oral sumatriptan has been shown to be more effective than current therapies such as Cafertog, but consideration of relative costs is important. On current prices, the sumatriptan formulations are considerably higher than other routinely used alternatives.

Prescribers may wish to restrict use of sumatriptan to

patients who do not respond to prophylactic treatment (for example with beta-blockers) and those who do not obtain adequate relief of symptoms with conventional analgesia and metoclopramide combinations or ergotamine derivatives.

Finasteride

Proscar (finasteride) is a new treatment marketed by Merck Sharp & Dohme for the

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Continued from p*v*

Acarbose is associated with a few adverse effects, including diarrhoea, post-prandial fullness and because acarbose allows undigested carbohydrate to remain in the gut, there is an increase in gas formation due to fermentation in the bowel.

• Contraindications

Acarbose is contraindicated in pregnancy, lactation, hepatic and severe renal insufficiency, chronic digestive or absorptive syndromes and any condition exacerbated by increased gas formation such as diverticular disease.

At present acarbose has been marketed in hospital, but the company plans to launch the product to general practice in the autumn.

Risperidone

Risperidol (risperidone) from Janssen is a novel antipsychotic of the class benzisoxazole-derivatives. It is indicated for use in the treatment of acute and chronic schizophrenic psychoses, and in other psychotic conditions in which positive and/or negative symptoms are present.

Positive symptoms include hallucinations, delusions, hostility, suspiciousness and thought disturbances. Negative symptoms include blunted affect, poverty of speech and emotional and social withdrawal. Risperidone has also been shown to have effect on some of the associated symptoms of schizophrenia such as feelings of guilt, depression and anxiety.

The underlying biochemical disturbance causing schizophrenia are not fully known. It is thought to be multi-faceted and includes overactivity of dopaminergic pathways.

• Mode of action

Current therapies act as antagonists of D₂-receptors. These drugs show little effect on positive symptoms in approximately one-third of patients and negative symptoms are even more resistant. Risperidone is also an antagonist of D₂-receptors, but it also has antagonistic action at the 5HT₂, alpha-1 and alpha-2-adrenoceptors and H₁-histamine receptor types.

• Dosage

The dosage regime recommended for adults over 15 years begins with 1mg twice a day, the dose is then increased gradually titrating to response. The normal range is 2-4mg twice a day; doses should not exceed 8mg twice a day and doses above 5mg bd should only be given if the benefit outweighs the risk of extrapyramidal side-effects.

• Side effects

Generally, risperidone is a well-tolerated drug. The extrapyramidal effects are less common and less severe than with haloperidol and respond to anti-parkinsonian medication. Other adverse effects include insomnia, agitation, anxiety, headache, and less commonly dizziness, fatigue, abdominal effects and

sexual dysfunction are seen.

• Cost considerations

Risperidone represents a major advance in the treatment of schizophrenia. It is as effective as conventional anti-psychotics against positive symptoms, has been shown to improve negative symptoms and has a good adverse effects profile. But it is expensive. Therapy for one month at the normal maintenance dose of 2-4mg twice daily costs between £81.60 and £158.40.

Moclobemide

Manerix (moclobemide) from Roche is the first of a new class of drugs, the reversible monoamine oxidase type A inhibitors (RIMAs) and is indicated for the treatment of major depression.

• Mode of action

The antidepressant action of MAOIs is due to decreased metabolism of noradrenaline and 5-HT, giving rise to increased concentrations of these two neurotransmitters in the brain. The enzyme may be classified into two sub-types, MAO-A and MAO-B. The first metabolises noradrenaline and 5-HT and MAO-B metabolises phenylethylamine and benzylamine.

Metabolism of dopamine and tyramine is carried out by both enzymes, and inhibition of MAO-A and B can lead to a potentially fatal reaction when tyramine containing foods are ingested. This 'cheese reaction' has not only led to medical complications but is also the reason for non-compliance of many patients with MAOI therapy.

Moclobemide only inhibits MAO-A, and allows MAO-B to metabolise dopamine and tyramine. So rigid dietary restrictions are not required as with traditional MAOIs, although patients are still advised to eat tyramine containing foods in moderation.

• Dosage

The recommended dose is initially 300mg per day in divided doses, rising to 600mg per day in severe depression. It is not necessary to reduce the dose in the elderly or patients with renal insufficiency, but patients with severe hepatic impairment should receive between half and one-third the normal dose. Use in children is not recommended.

• Side effects

Clinical trials of moclobemide suggest that the drug is very well tolerated, with a side-effect profile different from that of standard MAOIs and tricyclics. There have been reports of sleep disturbance, dizziness, nausea and headache, and some patients have been found to have transiently raised liver enzyme levels without any noted clinical effects.

Moclobemide should be prescribed with care in patients receiving NSAIDs and opiates, as their effect is potentiated. Cimetidine inhibits metabolism of moclobemide, and it is recommended that the dose be halved in concomitant use.

Homoeopathy and the community pharmacist

In the first of a two-part series, Steven Kayne, a community pharmacist and pharmacy tutor at the faculty of homoeopathy Glasgow and London, outlines the basic principles of homoeopathy and explains why pharmacists should learn about this subject

A recent study in Manchester showed that more people asked their pharmacist about homoeopathy than all other health professionals combined. Unfortunately, another study revealed that 70 per cent of a sample of pharmacists believed homoeopathy worked solely because "folk had faith in it", despite the existence of human and veterinary evidence to the contrary. This suggests that they would be unable to answer their customers' queries accurately.

With recent interest from the British Medical Association, complementary medicine is presently enjoying a high profile, and it is likely that the quest for information will increase.

The aim of these two articles is not to convert you — if indeed you need converting! — to the cause of homoeopathy, but to provide sufficient information for you to respond to customers' inquiries in an informed manner, and be able to counter prescribe simple remedies if appropriate circumstances present themselves.

Our OTC activities in community pharmacy relate to advising on acute self-limiting conditions, first-aid and some 'chronic' conditions — mainly coughs, strains and sprains or skin conditions. All these complaints can also be treated successfully with homoeopathy.

The rise of homoeopathy

In a letter to *Chemist & Druggist* in May 1880, signed 'One in the trade', a correspondent wrote: "Now that homoeopathy occupies a prominent position in domestic practice, this branch of the trade forms an important part in some pharmacies. I shall be much obliged by receiving your opinion with that of some of your readers as to the legality of a grocer selling them."

Such references to homoeopathy appear

frequently in early issues of this journal and, from time to time, advice was given on how to interpret and dispense prescriptions. For example, suggested instructions for arnica lotion were "direct that a piece of lint in three folds is to be soaked in the lotion, applied to the bruise and covered with oiled silk", while powders were to be "wrapped separately in tinfoil over the white paper and taken dry on the tongue or dissolved in water".

Some 50 years later, homoeopathic remedies were still being widely promoted by Boots. But with the advent of new powerful drugs and the growing influence of the pharmaceutical manufacturers, the discipline faded for two or three decades.

Following heightened interest in the risk/benefit ratios of medicines shortly after the tragedies that followed the introduction of thalidomide in Europe in 1956, homoeopathy enjoyed a spectacular revival, growing steadily to its current market value of around £16 million.

This figure pales into insignificance when compared with markets in other EC countries. France, for example, with a population similar to ours, has a market value of about 15 times the UK. In The Netherlands, the average spend on homoeopathy per head of population in 1991 was around £5.40 compared with around 20p on this side of the Channel. The figures are not entirely compatible for a series of reasons but, even if appropriate adjustments could be made, there would still be a large disparity.

It is interesting to note that homoeopathy suffers in most English-speaking countries through its unexplained mode of action; non-English-speaking countries do not seem to share these worries. If a remedy can be shown to be safe and efficacious it will be used, despite a lack of understanding



A worker at Nelsons potency bank in Wimbledon, selecting various potentiations for use in making up medicines

of its mechanisms.

There are lots of examples of orthodox or "allopathic" medicines whose action we do not fully understand — some, like paracetamol, are not as safe as homoeopathic remedies — yet colleagues continue to use this scientific argument against the discipline.

Alternative or complementary?

Homoeopathy and related non-orthodox treatments such as herbalism and aromatherapy are often called "alternative medicine". This term implies that one has to choose one of two courses of action. For example, making decisions between orthodox medicine and homoeopathy, or between homoeopathy and nothing.

In community pharmacy it is the complementary approach that is to be favoured. Here we can complement, or complete, what is already available, offering the patient the most appropriate combination of treatments in any given set of circumstances.

It may well be that an orthodox and a homoeopathic medicine could be used together to treat different aspects of the same disease. Antibiotics are not infrequently prescribed with belladonna by medically qualified homoeopathic physicians. Equally, there may be times when certain orthodox or homoeopathic medicines are inappropriate and the availability of other methods of treatment can prove valuable.

Good examples of the former

are in pregnancy (for morning sickness) or where there are fears of interactions in giving OTC preparations like travel sickness tablets or anti-diarrhoeals to patients already taking large numbers of prescription medicines.

Increasing demand

It is probably true to say that most pharmacists have become involved in homoeopathy by responding to a demand from their customers, rather than by actively encouraging its use. There are several possible reasons for the 50 per cent increase in demand from the public for homoeopathy over the past three years.

• Risk/benefit ratio

Perceptions of drug risk have been studied and found likely to influence patients' choice of treatment. Homoeopathy and other related therapies that collectively make up complementary medicine are considered by many people to be acceptable because they are approximately equal to vitamins, laxatives and oral contraceptives in their risk/benefit ratios.

• Sympathetic response

It has been suggested that homoeopathy appeals to patients who appreciate the sympathetic nature of the consultation with a homoeopathic practitioner.

• Price

Most homoeopathic remedies retail in the region of around £3, somewhat lower than the average sale, making them an attractive buy. As far as the NHS

Continued on pvi



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Continued from pvi

is concerned, homeopathic remedies are available on GP10/FP10 forms and have an NIC around 35 per cent of orthodox medicine for a similar course of treatment.

• Ethnic preferences

Many immigrant communities use complementary medicine as a first line treatment due to traditional reasons or a mistrust of Western medicine. There is an important demand from these sources.

• "Natural"

Complementary medicine is often portrayed as being "natural" by the media and this approach goes along with the fads and fashions of environmental awareness. Together with the significant spin off from Royal interest, this has had the effect of making more people aware of the advantages of complementary therapies.

Founder of homoeopathy

Homoeopathy was pioneered by Christian Samuel Hahnemann, a German physician born in Saxony in 1755. While translating a textbook by the great Scottish doctor William Cullen, he found himself in disagreement regarding the action of quinine, a recently introduced remedy for a condition then called marsh fever, but now known as malaria.

Cullen attributed the anti-malarial effect to the drug's astringent properties, but Hahnemann knew many other astringents that were not anti-malarials. He tested quinine on himself, recording every physical and mental symptom, to produce a comprehensive "drug picture" that appeared very similar to the "symptom picture" reported by patients suffering from malaria.

Hahnemann also observed that the symptoms of belladonna poisoning were similar to those of scarlet fever for which the remedy was being prescribed at that time. He postulated a law of drug action suggesting that remedies producing certain symptoms in healthy persons could cure sick persons presenting with similar symptoms.

When Hahnemann did his original work he administered substantial doses of medicine to his patients, not always with good results. Subsequently, he experimented by diluting his remedies and found that, as the concentration fell, remarkably the therapeutic effect rose.

Two further features of homoeopathy attributed to Hahnemann are treating the whole person, not just the condition in isolation, and the use of a single remedy to treat a condition whenever possible.

Homoeopathic principles

• Like to treat like
Hahnemann's first principle is embodied in the phrase *Similia*

similibus curentur or "let like be treated by like". Examples might be the use of *Coffea* (coffee) to treat insomnia or *Apis* (from the bee) to treat histamine-type reactions.

At first sight, this is rather different to the allopathic approach, when the use of syrup of figs to treat diarrhoea might be viewed rather strangely! However, there are several examples of this practice in orthodox pharmacy. Above a dose threshold, digoxin causes many of the arrhythmias for which it is a treatment; aspirin in large doses causes headaches.

not only about these huge dilutions. Potencies such as 6C are used frequently, particularly in the pharmacy OTC environment, and at this level there are still molecules left in solution that can be detected. Quantities of drug present are of the same order of normally prescribed amounts of allopathic thyroxine or digitalis.

• Treating the whole person

The holistic approach to treatment is perhaps the most important concept within the practice of homoeopathy and is shared with all other complementary disciplines.

To a homoeopathic physician,

unrelated questions. "Do you like spicy, salty or sweet food?", "Do you like to be alone, with people and are you fastidious, fussy or sensitive?", "Do you like dry or wet weather, cold or warm weather?" and, finally, "What prompted your visit today?" In this way the practitioner can build up a total picture of the patient, and rather than considering the case as "a sore throat attached to a body", can prescribe on the basis of "a body with a sore throat".

Obviously it is impractical to suggest that pharmacists adopt such an approach in a busy



A closer look at one of the potency files, and quality control work carried out according to GMP

pharmacy, and this limits the conditions that can be realistically treated OTC, as we will see in part two. But this holistic concept is being increasingly embraced in orthodox medicine, and a recent editorial in the *Pharmaceutical Journal* called for a more integrated approach to treating patients, with pharmacists taking an active part in a team comprising health professionals and social workers.

• The single remedy

Hahnemann's final idea was that of a single remedy to treat patients' ills. Many of us would welcome the demise of polypharmacy. The combination of ingredients in some OTC cough mixtures certainly appear to defy logic!

Thus, the four principles of homoeopathy are not all that far from the practice of modern orthodox pharmacy. They represent concepts with which we are already broadly familiar, although this may not have been immediately obvious.

• Part two of this series, which looks at the manufacture, dispensing and simple counter prescribing of homoeopathic remedies, will appear in *Pharmacy Update* on October 2.

• Minimal dose

This is the area where many pharmacists have extreme difficulty in accepting that homoeopathic remedies can possibly work. Sceptics make much of the huge dilutions that are involved in some homoeopathic treatments. These dilutions exceed Avogadro's number and so, theoretically, there are no molecules left in solution that can be detected with the methods we have available today.

However, homoeopathy is

there is no single remedy for an illness. One remedy may be used to treat a wide range of different conditions in different patients and two patients with similar symptoms may not receive the same remedy. The aim is to restore a patient to his or her own unique state of wellbeing, taking into account any environmental influences, and not just to an "average" well state.

A first consultation might take 30-40 minutes, during which time the patient will be asked all sorts of seemingly



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Beating a lousey problem with Rappell

Head lice are still regarded as a taboo subject by many people, causing embarrassment and concern among sufferers. Yet, with Charwell Pharmaceuticals' Rappell, your customers can take positive action to protect themselves and their families

While much more is known today about head lice, for many people it is still an embarrassing infection to deal with.

Whether it's thoughts of the school "nit" nurse, childhood memories of foul smelling treatments, or simply a case of decades of public misinformation, the social stigma and discomfort attached to admitting the presence of lice is very much alive and kicking.

You can help your customers to protect themselves and their family from infection by recommending Rappell, the first effective head louse repellent, which is available from Charwell Pharmaceuticals.

An environmentally friendly product, Rappell contains piperonal, a pleasant smelling, natural compound produced by plants to repel harmful insects. Use of Rappell helps keep lice away.

Lice facts

So what are lice? About 3mm long and greyish brown in colour, head lice feed off the blood of the scalp.

Using a stylet, which works in a similar manner to a hypodermic needle, the louse injects the skin with saliva which contains an anti-coagulant, a local anaesthetic to prevent individuals feeling the bite, and enzymes to aid blood digestion, and then begins to draw in blood.

Head lice prefer the warmth found close to the scalp. They have three pairs of legs, complete with claws, which help them to cling to the hair. This makes them difficult to brush out.

And, like a chameleon, lice can change colour to suit whatever the colour of the head they may be residing on. A handy way of preventing detection!

Exploding the myths

Despite a better health-informed public, many people still believe that head lice are a by-product of uncleanliness — hence the uneasy response from many parents once an outbreak is discovered at school.

Misguided beliefs still prevail and fear of head lice infection has prompted some mothers to use treatment products prophylactically, a practice which could result in



the lice becoming more resistant to insecticide treatment.

In reality, head lice feed solely on human blood. They are definitely not a side effect of dirty hair.

Neither is clean hair necessarily lice free — constant washing will only result in clean lice. In fact, lice actually prefer clean hair.

Lice move by crawling on the strands of hair. They cannot fly or jump, but spread randomly from person to person as heads meet.

Traditionally it has been accepted that most cases of head lice are passed on in schools.

This view has resulted in more than a few of our educational establishments

having to deal with irate parents who still see lice outbreaks as a basic school hygiene problem.

While it is true that children will often have close head to head contact while crowded round a table or desk, this behaviour is just as likely within the family or with friends.

Dr John Maunder, a world expert on head lice and director of the Medical Entomology Centre at the University of Cambridge, states: "Because it takes quite a prolonged head to head contact to catch head lice, it means that the idea that we always catch head lice from strangers is a myth."

"You don't put your head up against a stranger even for a few seconds let alone a few minutes. As a result we always catch head lice from somebody we know — and someone we know well. It's going to be family, close friends, sweethearts really, because they are the only people we

Advising customers:

- **Check to see whether lice are present** (see text for details).
- **If yes**, offer the product currently being recommended by rotational policy. Once infection has been treated, check that the lice have been cleared completely and use Rappell to guard against reinfection.
- **Offer a Rappell leaflet** to complement the treatment.
- **If no lice are present**, then advise Rappell for immediate use. (Remember: Rappell is not recommended for children under the age of two, asthmatics or those with sensitive skin.)
- **Don't forget** to remind parents that lice aren't only spread at school. Other family members and friends may also need a treatment and a repellent.



touch heads with."

And statistics back this up showing that adults and pre-school age children account for half of all cases.

Protection

To guard against infection, Rappell, an aqueous-alcoholic based preparation, is sprayed on to the hair in the morning after styling, using about 5-25 sprays dependent on hair length.

Its action is to cause a negative response at the receptor site on the end of the louse's antennae. This deters the louse from moving onto Rappell sprayed areas.

Rappell does not kill lice and so, before using it, first establish whether lice are already present.

A louse infection can be around for eight to ten weeks or for some 10,000 bites without their presence being "felt" and without obvious visible signs.

The easiest way to check for lice is by running a lice detection comb through damp hair.

If lice are present one or two will be seen on the comb. In such cases, the current treatment recommended by

pharmacists should be used.

Once treatment has been successful, and the lice have been cleared, then Rappell can be used to protect the head.

If, however, there are no lice present then Rappell can be used immediately to give protection.

A pro-active approach

Often a pharmacist is approached by customers who have discovered head lice for themselves, or have been notified by their school.

The pharmacist should offer the insecticide which is the current recommendation on the rotational policy. This reduces the likelihood of insecticides being over used, and also discourages resistance.

The pharmacist should emphasise the correct use of the treatment, and can then use the opportunity to introduce Rappell as an effective means of protection against re-infection once head lice have been completely cleared.

This can be helped by showing and demonstrating Rappell and issuing the explanatory leaflets which are

readily available.

If you would like to know any more about Rappell, telephone or write to Charwell Pharmaceuticals Ltd, Charwell House, Wilsom Road, Alton, Hampshire GU34 2TJ. Tel: 0420 84801. Fax: 0420 89376.

Alternatively, why not win yourself a stylish pen and find out more about this exciting new pharmacy only product, by entering the competition.

Questions most asked about Rappell

Q. How does it work?

A. Rappell contains piperonal, a natural compound which head lice do not like and actively avoid.

Q. When do I use it?

A. If no lice are detected, use Rappell daily when there is a risk of infection. If head lice are detected, use insecticide treatment as recommended by the pharmacist. Check all lice have been cleared. Then use Rappell.

Q. How do I use it?

A. Spray on to hair in the morning after styling.

Q. How much do I use?

A. 5-25 sprays, dependent on hair length.

Q. What does it smell like?

A. Very pleasant — like almonds.

Q. How does it make your hair feel?

A. Similar to hair spray.

Q. Does Rappell influence treatment on rotational policy?

A. No.

Q. What happens when you wash your hair or go swimming?

A. Rappell needs to be re-applied.

Q. How much does it cost?

A. Rsp is £4.69.



Competition

Charwell Pharmaceuticals, manufacturers of Rappell, the first effective head lice repellent, are offering a quality pen to pharmacists who can correctly answer the following questions about Rappell. Correct entries will receive a pen, together with information leaflets, to help you and your staff spread the good news about Rappell. All you have to do is answer the questions below and return them to Charwell Pharmaceuticals, C&D competition, Charwell House, Wilsom Road, Alton, Hants GU34 2TJ. The closing date is October 1, 1993.

1. Head lice are attracted to piperonal: True/False
2. Head lice can only be picked up at school: True/False
3. Rappell is a head lice insecticide: True/False

Name:.....

Address:.....

Pharmacy:.....

Antennal tip of louse showing receptor sites. Reproduced courtesy of the Medical Entomology Centre at the University of Cambridge



HEAD START

In the old boat-building town of Whitstable, a piece of traditional England survives, untouched by changing fashions. Morgan's Pomade, the gentleman's hair darkening dressing, is 120 years old. The familiar bright yellow label has been the same since before the war and they're proud of it. Shunning the practise of repackaging and relaunching products to "attract new users" followed by most of the toiletries industry, Morgan's trade on their resistance to change.

"The formulation has remained more or less the same since it was first produced," says Ray Martin, former technical director of Morgan's and member of the founding family. The active ingredients which produce the hair darkening results have always been sulphur and lead acetate. The base material used to be lard, but that is now no longer used.

What has changed at Morgan's are the customers. Once the "must have" product of every English gentleman in the days when grey hair was not acceptable, Morgan's Pomade now relies on the gentlemen (and ladies) of West Africa and the Far East. Finance director Walter Merry admits that over the years "the greatest change to Morgan's has been the decline of the UK market and the increase of export business". Some 85 per cent of business goes through exports, with Morgan's products sold in over 50 countries.

Mr Merry explains the success of the products abroad: "The pomade works particularly well in sunny climates and on coarser hair types. The Englishness of the product is a good selling point, and also its competitive price. It's a household name in many countries."

Celebrity links

Morgan's Pomade used to be a household name in Britain too, helped by showbiz celebrities such as Bob Hope, who mentioned it in one of his Christmas shows. The company

has kept letters praising the Pomade. One, dating from 1943, is from a soldier whose services were refused in the Second World War because he looked too old. He tried Morgan's Pomade and was accepted on his second attempt.

Another claim to fame was during the 1950s when *Carry On Screaming* was made, remembers Frank Martin, also of the founding family and now

retired.

One scene in the film featured a gents' loo and, in those days, there always used to be a hairdresser present and a pot of Morgan's Pomade, says Mr Martin. The film company asked for a sample dating back to 1906, when the product was wrapped in cartridge papers and secured with sealing wax. Fortunately one of the employees was old enough to remember how it was made and produced the sample.

The family that owns the Morgan's range has a rich and romantic history. The company was founded by Robert Martin, a technical buyer for a hairdressers' company called Hovenden & Sons. He had an idea for producing a shampoo of his own but, not wishing to take the risk of giving up his job, he took the assumed name of Roper and began to make and sell Marie Antoinette Eucalyptus Egg Julep shampoo from the basement of his north London home.

Royal roots

Legend has it that the shampoo was originally formulated by the hairdresser to the late Queen of France, Marie Antoinette, who had escaped to England during the Revolution, bringing the formula with him. This may well be true, since the grandmother of Mr Martin's wife was of

This year the traditional gentleman's hairdressing treatment Morgan's Pomade is 120 years old and still produced by the founding family. In a fast-changing toiletries market, the product has stood the test of time. Sarah Purcell went to Whitstable to uncover the story behind its success

Robert Martin, founder of Morgan's Pomade

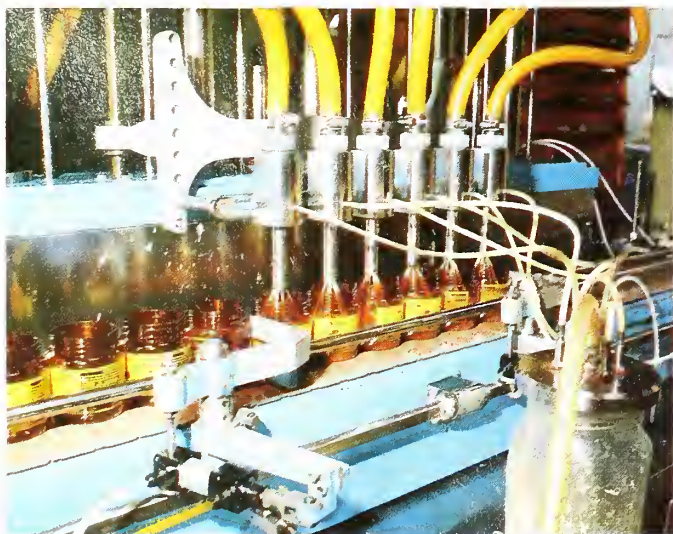
French aristocratic descent. True or not, the shampoo was a success, and was one of only three major brands on the market at that time.

Being an entrepreneur, Mr Martin looked for further opportunities. He was interested in a product made by a company called Thomas Morgan for "restoring grey hair to its original colour" called Morgan's Red Cross Pomade, registered in 1873. In 1891, Mr Martin bought the brand for £100, which he paid off at £5 per month. His employers found him out and he was asked to leave, so he formed the Marie Antoinette company.

Mr Martin was an eccentric with a short temper. Apparently he tripped over the hall carpet one day and promptly rolled it up and dumped it in the street. An ottoman was sold when he banged his knee on it. He married his wife Jane Richards when he was 16 and they produced 17 children, though only 12 survived.

During the First World War the words Red Cross were deleted from Morgan's Pomade under orders from the War Office. Mr Martin died in 1917 and the business, which by then was in larger premises in Highgate, was taken over by his wife Jane.

She had a lot to cope with. As well as losing her husband, her eldest son was killed in the war and a daughter died in childbirth, yet "with true British spirit", reads her biography in the 1931 *Who's Who in the Drug and Allied Trade*, "she controlled the affairs of the house, and it is due to her unceasing effort that the company's turnover has been so



Pumping out Pomade for the next order

Lyclear Creme Rinse Prescribing Information

Presentation Each 59ml bottle of Lyclear contains 1% w/w permethrin plus 20% w/w isopropanol in a creme-rinse base. **Uses** For the treatment of head louse (*Pediculus humanus capitis*) infections. **Dosage and Administration** Adults and children over 6 months: Shampoo hair as normal, rinse and towel dry. Shake the bottle thoroughly and apply enough Lyclear to saturate the hair and scalp. Leave on the hair for 10 minutes, then rinse thoroughly with water and dry in the usual way. **Contra-indications, warnings, etc.** *Contra-indications* Sensitivity to permethrin, other synthetic pyrethroids or pyrethrins. **Precautions:** For external use only. Wear gloves for multiple applications. Only use in children under 6 months under medical supervision. Use in pregnancy only if potential benefit outweighs the possibility of unknown risks. **Side- and adverse effects:** Adverse reactions are frequent, mild and transitory, and are usually also symptoms of head louse infection. **Basic NHS Cost:** £1.91. Legal Category [P] PL3/0252. Further information available on request. The Wellcome Foundation Ltd., Crewe, Cheshire CW1 1UB. Lyclear is a Trade mark.



Wellcome

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LYCLEAR

Permethrin

A highly effective treatment for head lice.



*99% overall cure rate after one week.

Eradicating head lice hasn't always been easy or pleasant. But now Wellcome can offer you Lyclear Creme Rinse.

Based on the tried-and-tested permethrin compound, Lyclear is highly effective as a single application creme rinse, and used as easily as a normal hair conditioner.

In fact, just one ten minute Lyclear treatment is sufficient to kill lice and eggs, with the comparative effectiveness of either a 2 or 12 hour malathion application. What's more, Lyclear's strong residual capacity can protect against reinfection for as long as 6 weeks after use.



Although highly effective, Lyclear has a pleasant smell, is unlikely to cause eye irritation, has low potential for toxicity or allergic reactions, and is biodegradable.

With its recognised cosmetic advantages together with its proven clinical potency, Lyclear is an ideal head lice treatment for every member of the family.

Lyclear is a head lice treatment you can confidently recommend to be quick, effective, and pleasant to use.

LYCLEAR

C r e m e R i n s e

Kills head lice in just one 10-minute application.

greatly augmented".

The company remained in Highgate until the Second World War, when premises were commandeered by the government and so had to move in with Potter & Moore in Leytonstone.

Pomade takes over

The shampoo business fell by the wayside as Mrs Martin lacked the funds to compete with new up and coming brands after the war. Morgan's Pomade became the main product and for tax reasons the Morgan's Pomade company was formed as a subsidiary.

The business prospered and more staff were taken on to cope with the growing order book. In 1959, larger premises were needed and the company moved to Fooks Cray in Kent, now with a total of 20 staff. The export side of the business took off and in 1964 the company moved again to purpose-built premises in Swalecliffe, Whitstable, where they are today.

The 1970s were boom time for export, and at one time Morgan's Pomade was sold in 120 countries. But as developing nations such as India and Nigeria ran into currency problems, the import of luxury goods was banned.

Grandson Robert Martin was now in charge of sales. He eventually purchased a majority stake in the company, the other main shareholder being Walter Merry, the current finance director.

History was to repeat itself. Robert Martin died suddenly of a heart attack in 1991 when he was just about to leave on an export tour. His widow Patricia subsequently took his place and became controlling shareholder of the business. Together with Walter Merry, she runs the business, which turned over £800,000 last year and employs a staff of 21.

Branching out

With a view to developing the business, a marketing manager, Bill Staunton, was taken on a year ago. Since many women already use the Pomade, the company is currently looking at the women's hair darkening market with a view to developing a lotion for export in the next year or two. The company does some contract manufacturing and packaging, but there are no licensing agreements with other manufacturers.

Morgan's are moving with the times, their most recent development being a unisex hair darkening mousse which is proving successful. They are looking to increase exports further and are currently in negotiation with agents in China, which they believe would be a huge opportunity.

But at the same time they are holding on to their heritage, keeping their star product, Morgan's Pomade, unchanged. It is more than can be said for Whitstable. The 1,000-year-old boat building industry has finally died.



Morgan's Pomade was a big US hit in the 1930s (above). Carrying on the tradition are (from left, below) finance director Walter Merry, managing director Patricia Martin and family members Raymond Martin and Frank Martin, both now retired



THE INTERNATIONAL CONGRESS ON SMOKING CESSATION

S.E.C.C.
GLASGOW
5-8 MARCH 1994



While recognising the importance of meetings focusing on legislation, restriction on advertising, as well as national and international programmes on smoking cessation, there is a strong argument in favour of an international gathering of inter-disciplinary experts dealing primarily with the pathophysiological consequences of smoking. The Preliminary Programme for the International Congress on Smoking Cessation has, among others, the following aims:

- ◆ To focus on the concept of smoking as a preventable disease by bringing together experts on the pharmacology of nicotine, nicotine dependence and the pathophysiological processes resulting directly from smoking.
- ◆ To consider the changing epidemiology of smoking-related diseases and to debate the interpretation of the statistical basis for establishing an association between both primary and secondary (passive) smoking and specific diseases.
- ◆ To provide a forum for concerned scientists to discuss the current research into methods of stopping patients smoking and to examine currently available and future therapeutic interventions to assist in smoking cessation programmes.

Topics for inclusion

These themes will be covered under the following sections:

Smoking as a Disease

◆
Established Risks of Continuing Smoking

◆
Environmental Tobacco Smoke (ETS)

◆
Benefits and Problems of Smoking Cessation

◆
Aids to Cessation

◆
The Total Approach to Smoking Cessation

FOR FURTHER INFORMATION PLEASE CONTACT:

Congress Secretariat: Gardiner-Caldwell Communications Ltd, The Old Ribbon Mill, Pitt Street, Macclesfield, Cheshire SK11 7PT, UK. Tel. 0625 615325. Fax No. 0625 616563
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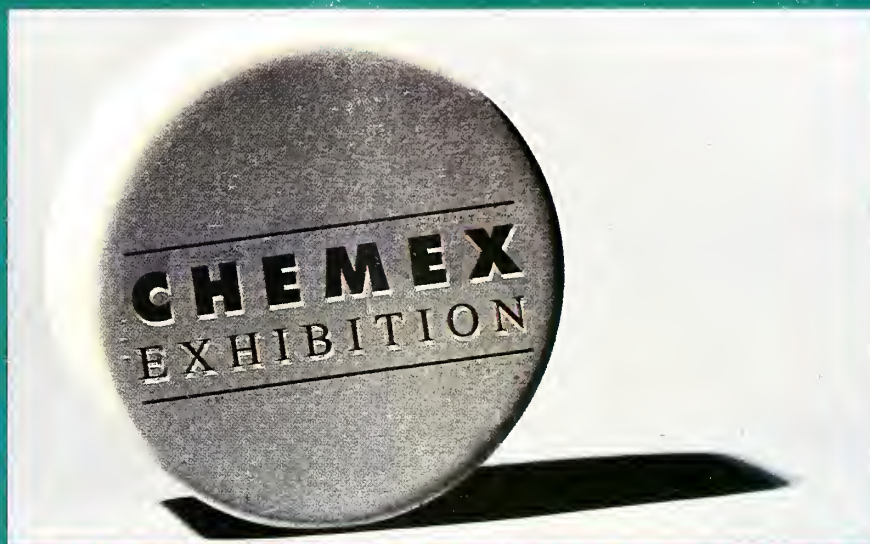
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3M scent new market

Dry Perfume is 3M's latest fragrance innovation.

Developed by the company's micro-encapsulated products group, it is a pressed powder held in spheres. Once the spheres are broken, by stroking a finger along the powder, the perfume is released.

Micro-encapsulation protects the fragrance from contamination and so it remains true to the original scent, according to 3M.

They are working with some of the major fragrance houses and hope to introduce the first Dry Perfume products to the UK in 1994.

Addis sell sunglasses ranges

Kitty Little last week bought the Samco and Optico sunglasses ranges from Addis for an undisclosed sum.

Production will cease at Addis' Hereford site in November, moving to Kitty Little's Stoke-on-Trent factory. Addis say they will be responsible for returns of 1993 stock until November this year.

Managing director of Kitty Little, Graham Webster, told *C&D*: "Both ranges will continue as a subsidiary of Kitty Little under the name Samco Sunglasses Ltd."

He says they will be taking on all consultants and merchandisers employed by Addis and will continue sourcing products from Italy.

Mr Webster says that Samco will remain a high quality brand and a fashion leader.

ABPI members reluctantly accept PPRS

The UK pharmaceutical industry has reluctantly accepted the Pharmaceutical Price Regulation Scheme (PPRS), according to the Association of the British Pharmaceutical Industry (ABPI).

The PPRS, due to come into effect on October 1 this year, imposes a 2.5 per cent across the board price reduction for three years (*C&D* August 14 p276).

The ABPI make the following points outlining their concerns regarding the new PPRS:

- The PPRS will control overall company profits by setting a permitted level of profitability. Companies will be free to set their own prices within these limits.

However, there is no pricing freedom for the products covered by the seven existing and ten proposed Limited List categories.

In effect, the price cut is a price

freeze for companies falling within the allowable profit band, says the ABPI, as they will not be able to increase their prices for three years. It is estimated that this will cost the industry £80 million in the first year alone.

- The price cut of 2.5 per cent is equivalent to a return on capital reduction of about 3 per cent, reducing the return on capital for each company to between 14 and 18 per cent.

- The new scheme halves the maximum discretionary extra profit ceiling. A company with an allowance of, say, 16 per cent (the middle of the effective target range) will now sit in a "margin of tolerance" of 4 per cent either way. The true profit range for that company is now 12-20 per cent.

This represents a reduction in

allowed profitability of 8.5 per cent — which could equate to almost one-third of its total profit on its sales to the NHS.

- The new average allowable profit is lower than the average return of equivalent FT-500 companies.

- Companies must now discuss with the Department of Health in advance the pricing of a new product if it is going to have a major impact on the NHS drugs bill. Under the previous scheme, they had full freedom of pricing for new products.

- The scheme has been negotiated at a time when other DoH measures to contain the NHS drugs bill are damaging UK companies. The other measures highlighted include GP fund-holding, generic prescribing and formularies and the limited list extension.



Sangers of Maidstone, whose 44 pharmacies trade under the name Paydens, have signed a deal with Chemtec worth over £100,000. Chemtec will provide all Paydens branches with the Alchemist 3000 dispensary computer systems. Pictured from left are: Dale Arm-Riding, sales and marketing manager at Chemtec; Steve Martin, Sangers ethical manager; and Tom Kane, senior sales manager, Chemtec

Call for JIC 'wages council'

The shopworkers union USDAW wants to set up Joint Industrial Councils (JICs) to safeguard pay for employees following the abolition of the Wages Council. A retailing JIC is one of the proposals.

Employers are invited to join with trade union representatives to form voluntary bodies which can set minimum pay standards and also agree on working hours, holidays and sick pay arrangements.

A pharmacy JIC already represents retail pharmacy employees.

Bayer sales and profits down

Bayer have reported sales of DM21 billion [£8.6 billion] for the first half of the year, a decrease of 5 per cent on the same period last year. Pre-tax profits fell by 20 per cent to DM1.4bn.

The healthcare sector remained stable at DM4.6bn despite negative effects of healthcare structural reform in Germany. Bayer credit the stability to foreign sales of pharmaceuticals

and also the growing self-medication market.

The 5 per cent decrease in sales overall was due to shifts in exchange rates (3 per cent) and lower volumes and price reductions (1 per cent each).

Bayer have reduced their numbers of staff by 2,700 since the beginning of the year. Expenditure has been cut by DM0.2bn.

New trading terms from Glaxo

Glaxo Pharmaceuticals have changed the discount thresholds from this month.

The new thresholds are:

- For monthly purchases up to £560, the discount rate is 2.5 per cent

- Purchases of between £560 and £2,800 attract a 8.5 per cent discount

- A discount rate of 9.5 per cent

will be given for purchases of between £2,800 and £5,000

- Monthly purchases of £5,000 to £8,250 will receive 10.5 per cent discount.

These threshold changes do not affect Glaxo's standard trading terms.

There is a freephone helpline for any queries, tel: 0800 221441.

Kodak cut staff

Eastman Kodak have announced job cuts of 10,000 by the end of 1995. This is in addition to the 2,000 job losses announced earlier this year, and form part of the company's plan to reduce costs by \$2 billion.

Analysts suggest that the cuts are only half of what is needed to revitalise Kodak, which made losses of \$1.65bn in the first six months of this year.

The number of redundancies among Kodak's 6,500 UK staff has not been confirmed.

Tuition and offers on labelling from Park

Park Systems have introduced a tutorial demonstration program showing the features of the new Park PMR labelling system which includes prescription endorsing.

It will run automatically, taking the user through the features with explanations at each step. It is available free of charge on floppy disk to run on any PC computer.

Park are offering the loan of a portable PC, complete with the tutorial program ready-loaded, to those who do not have access to a

PC. Copies of the disk are available from Park.

This month sees the launch of Park's "Golden Options" promotion, with bonus offers available until the end of March. A £1,000 part-exchange allowance is being offered on the PMR system along with offers on an EPOS system.

For those wishing to purchase their own hardware, Park will provide the software for less than £10 per week (based on an annual contract).

Kabi merge

Kabi Pharmacia Ltd have merged with Farmitalia Carlo Erba Ltd. All inquiries should be directed to Kabi Pharmacia's head office (tel: 0908 661101).

Sunday shopping

Sunday September 19 has been designated National Sunday Shopping Day by the Shopping Hours Reform Council. A national campaign will be launched to highlight the current Sunday shopping laws and to outline the benefits for shoppers and workers.

MAFF ban MCHOs

The Ministry of Agriculture, Fisheries and Food has further restricted the use of mineral hydrocarbon oils as food additives and processing aids, which will now be subjected to the ban proposed in 1989.

Compound database

A database will be available in January for data on new biologically active compounds. It will be updated weekly with information from patents, literature and conferences. Derwent. Tel: 071-344 2800.

Recovery continues

September shows continued recovery in UK manufacturing and expansion in employment, says the Chartered Institute of Publishing and Supply.

Tips on spotting funny money

Volumatic have published a checklist for pharmacists to bear in mind when dealing with paper money.

- The print on real notes feels different to that on false notes. On real notes the print will run, unlike that on fakes.
- Do not place reliance on ultra-violet checking as forgers can now use UV-dull paper.
- The Bank of England produce four basic defences in every note they print.

The silver security thread has a dotted appearance on one side; the water mark on a real note is an accurate replica of the Queen's head while that on a fake note often has a cartoon-like appearance; an international copyright symbol recording the bank's copyright in the design of its notes; and on the front of the new notes the numbers are printed in multi-colour and are of varying height.

Volumatic advise that pharmacists train their staff to examine every note when they receive it. All counterfeit money has to be handed into the police. Passing it on is a criminal offence.

Cantab on Stock Exchange?

Cantab Pharmaceuticals, the Cambridge-based biopharmaceutical company, is to seek a listing on the Stock Exchange.

Cantab hope to raise between £15 million and £20m by offering ordinary shares to fund the development of new products.

Cantab's chief executive Dr Paul Haycock says: "We believe the time is now right for us to raise finance on the London Stock Exchange to fund our continued development."



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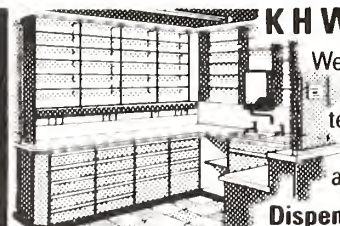
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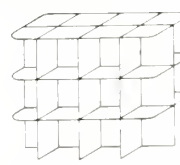
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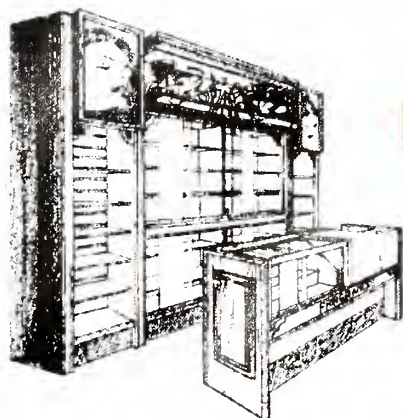
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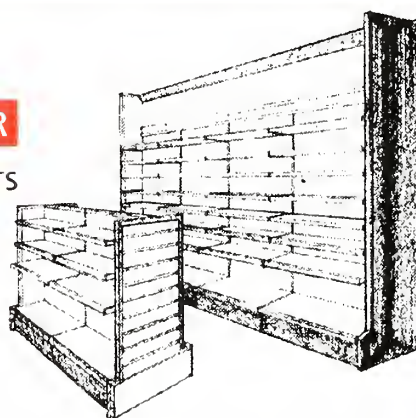
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EXPERIENCED MATURE LOCUM - Now booking for October onwards, will travel if suitable accommodation available. Tel: 071-739 4826.

BUSINESSES FOR SALE

NEAR SW12 TUBE STATION - Turnover £240,000, N11S 1,500, rent £7,100 pa. £75,000 & SAV. Tel: 081-673 6288.

EXCESS STOCK

TRADE LESS 40%+VAT - Simcare Stoma bag 32-244-81 5x90. Tel: 0900 812662.

TRADE LESS 30%+VAT - 91 Drogenil 250mg, 100 Librax (exp 12/93), 100 Rocaltrol 0.5mcg (exp 3/94), 56 Farlutal 500 (exp 12/93). Tel: 081-504 2973.

TRADE LESS 50%+VAT+POSTAGE - 60 Nuelin SA-250 (exp 10/93), 85 Sinemet 110 (exp 12/93), 18 Hexopal Forte (exp 11/93), 36 Feldene 10mg disp (exp 9/93). Tel: 0509 234231.

TRADE LESS 45% - Adizem tabs 60mg. Tel: 071-736 4126.

TRADE LESS 30%+VAT - Convatec products, bag S261, pouch S863, Plange S353, filter S208, S831, Stomahesive paste. Tel: 051-228 4519.

TRADE LESS 50%+VAT - Provide (apple) x 16 (exp 11/93), Anafranil SR 75mg (exp 12/93), Atomid S (exp 10&12/93), Ques-tran (exp 1/94). Tel: 051 228 4519.

TRADE LESS 50%+VAT+POSTAGE - Becotide "50 inhalers (exp 10/93), plus many more. Tel: 081-534 2394.

TRADE LESS 30%+VAT - 1x21 Cyclo-Progynova 2mg, 15 x tabs Nizoral, 98 x tabs Orap 2mg, 2x21 Progynova 2mg, 73 x Stelazine spans 10g, 1x28 Menophas. Tel: 0322 432146.

TRADE LESS 50%+VAT - Convatec S354, Klorof-S, Aquadray tube ref. 783528, Alu-caps, Hollister 143. Tel: 081-539 1805.

TRADE LESS 35%+VAT+POSTAGE - Zo-fran 8mg tabs (exp 12/94). Tel: 061-962 4255.

TRADE LESS 40% - Hollister Karaya 5 seal pouches 8x30, 40x20ml Xylocaine 1% injection. Tel: 081-946 6282.

TRADE LESS 35% - Lioresal, Cinobac .55/20, Macrodotin 50mg trade less 25% plus many more. Tel: 0482 54260.

£5 - 3x15g Neo-medrone cream (exp 9/93), 1x78G Ortho-Gynest Cream (exp 10/93). Tel: 081-892 1846.

TRADE LESS 30%+VAT+POSTAGE - 59 Retrovir 100mg, (exp 11/93), 210 Barafol 25mg, 200 Anturan 100mg, 55 Trasidrex (exp 11/93). Tel: 0642 245859.

TRADE LESS 50%+VAT+POSTAGE - 1 x Diprosone lotion, 20 x Iliprex tabs, trade less 30%+VAT+postage - 1 x Cicatrin Powder 50g, 16x Becotide nch suspension. Tel: 0322 526470.

TRADE LESS 50% - Dithrocream Forte (exp 10/93). Tel: 0352 752050.

TRADE LESS 50%+VAT+POSTAGE - Provera 100mg tabs, Co-Betaloce SA. Tel: 071-620 0429.

TRADE LESS 50%+VAT - Iodosorh 2x2x20G (exp 11/93), 3x56 Surgam 300 (exp 8/96), 75ml Suprax (exp 12/93). Tel: 021-747 2920.

TRADE LESS 30% - 1x30 Provera 400mg tabs, 1x500 Dramamine tabs, 1x100 Rifinah 150mg and 300mg. Tel: 0622 882386.

TRADE LESS 20%+VAT - 4x49 Minocin MR caps (exp 1/94). Tel: 0904 642557.

TRADE LESS 30%+VAT+POSTAGE - 8x150ml Burinex liq, 4x30 Hollister 7163, 1x50 Hollister 7184, 3x20 Brufen granules. Tel: 061-336 1536.

TRADE LESS 50%+VAT+POSTAGE - 1x30 Dansac 226-60, 1x30 Dansac 228-20, 10x30 Convatec S265, Atmocol sprays, Chiron barrier cream, Biotrol flatus filters, Forest Breeze deodorant. Tel: 0202 574386.

TRADE LESS 50%+VAT+POSTAGE - Ex-frel 10mg caps x 170, Denol liquid 560mlx1, Zantac syrup 300mlx1, Menzol (8 day) 2x24 (exp 10/93), Nifensar XL tabs x 70, Dithrocream Forte 50gx1 (exp 10/93). Tel: 0502 572603.

TRADE LESS 50% - 153 Orap 2mg (exp 4/94) 114 x Rhythmodan 100mg (exp 9/93) 50x Fentazin 4mg, 112 x Glibenese 5mg (exp 10/93) 74 x Corwin (exp 1/94). Tel: 071-582 6344.

FLIP FLASH - Flash bars, flash cubes (box of three), £1+VAT per item. Tel: 091-536 4640.

HALF PRICE+VAT+POSTAGE - 4x3 Hollister 7168 (purchased 3/93). Tel: 0692 722806.

TRADE LESS 45%+VAT - 80 Provera 400mg (exp 10/93). Tel: 0952 260800.

£5 PER BOX - 1x8 Simpla 200ml short tube, 2x30 Biotrol 32-343 40mm, 8x10 Thackray 32mm (78-4419), 1x5 Simpla 350ml short tube, 8x30 Hollister Karaya no. 7169 (1.75), 1x30 Hollister Karaya no. 7278 (1.25). Tel: 0422 352540.

FOR SALE

FIVE JOHN RICHARDSON PMR LABELLING SYSTEMS - Fully maintained by JRC, full labelling facilities, patient medication records, stock control, drug interaction, auto order etc. Tel: 0924 290351.

NEW UNUSED PARK PMR SOFTWARE - Version 6, unwanted prize, best offer secures. Tel: 0705 475577.

TWELVE ESELTE METO GUNS 626 - Takes 26mm, pricing labels, will accept £10 for each gun, plus VAT and postage. Tel: 0825 761349.

GOLF CLUBS - Yamaha Grantech Graphite shafts, 3 metal woods plus 3-SW irons, good condition, £600 ono. Tel: 081-989 3353.

KIRBY LESTER KL7 - Needs attention,

best offer secures. Tel: 071-254 2696.

LOCUMS

KINGSTON, SURREY - Locum required for a very quiet pleasant pharmacy from October 13 - November 19. Would suit elderly pharmacist. Tel: 081-546 0372.

LONDON SE16 - Locum pharmacist required for a community pharmacy on December 29, 30 & 31. Tel: 071-237 3483 or 071-511 2884 after 7.30pm.

SOUTHEND - Part-time pharmacist required to work two afternoons Monday and Friday 2-6pm. Tel: 0702 525667.

CASTLEFORD, PONTEFRAC, WAKEFIELD - Locums required, good rates of pay. Tel: 0977 553507.

WANTED

REQUIRED TWO MODERN CHEMIST COUNTERS - With angled sectioned tops (or flat) suitable for display of patent medicines. Tel: 0704 68401

NOMAD CASSETTES - In good condition. Tel: 08687 84728.

ANY STOCKS OF BETA CARDONE - 40mg tabs. Tel: 071-703 9800 or 081-642 4200 evenings.

IMPORTANT

Because demand for free "Business Link" entries exceeds the space available, subscribers are asked to comply with the 30-word limit. To avoid delay in publication, please ensure that brand and drug names have the correct spelling and that the text is legible.

Free entries in "Business Link" (maximum 30 words) are restricted to community pharmacist subscribers to *Chemist & Druggist*. No trade advertisements will be permitted. Acceptance is at the discretion of the Publishers and depends upon space being available. Send proposed wording to "Business Link" using the form printed in a previous issue.

EXCESS STOCK CAUTION: Pharmacists are responsible for the quality, safety and efficacy of medicines they supply. In purchasing from sources other than manufacturers or licensed wholesalers, they must satisfy themselves about product history, conditions of storage and so on.

To: Business Link, CHEMIST & DRUGGIST, Benn House, Sovereign Way, Tonbridge, Kent TN9 1RW.

PLEASE COMPLETE IN BLOCK CAPITALS

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Proposed advertisement copy (maximum 30 words)

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To be included under section Heading

Signed Date

Aboutpeople



Tony McElhinney, a Bexleyheath pharmacist, gets ready to catch the keys of a brand new Ford Fiesta XR2i from Paula Hedges and Angela Sanderson (right) of Bristol-Myers. Mr McElhinney correctly answered questions on Clairol's range of hair colourants in their Loyalty Scheme competition, and he came up with a witty tiebreaker to claim his prize

SB's top four scale the Matterhorn to raise £50,000

Four top executives from Smithkline Beecham's Brentford HQ abandoned their desks last month to raise £50,000 for charity in what turned out to be "the most terrifying 48 hours of our lives".

John Clarke, general manager and vice-president; Roger Scarlett-Smith, marketing director; David Crow, marketing manager; and Steve Harpin, product manager took 48 hours to climb the 14,690ft Matterhorn via the Hornli Route, north-east ridge, in aid of Children in Need. They have raised nearly £50,000 to date.

Conditions were foggy and snowy and each step taken was a major achievement, says Steve Harpin. But he added that it was all worthwhile just to experience "absolute triumph at overcoming such heavy odds" when they

reached the top. The four were accompanied by skilled guides on the journey.

The climb was different from the virtual reality of the training weekend the group attended in Snowdonia where one team

member so impressed by his innate ability to stick like a limpet to the rock face he was christened The Fly by the group.

The money raised is part of a total of £100,000 which SB hope to raise for Children in Need.



Bolton pharmacist Malcolm Suss, of Dyson's Chemists, wins top prize of 7,000 air miles in the Sweetex Granulated window display competition for independent pharmacists. Simon Rose, senior product manager (left), Steve Ayling, field sales manager, and Frank Duxbury, territory manager (right), presented Mr Suss with his prize

A first for Bhunnoo

Mrs Rhona Bhunnoo, supervisor at the Boots Health and Beauty store in Strood, Kent, is the first person in the country to achieve a National Vocational Qualification (NVQ) in retailing at level III.

Mrs Bhunnoo spent two years working towards the NVQ. She was required to demonstrate management team-building skills

plus retailing expertise and assemble a portfolio of evidence to establish a thorough understanding of the business.

"I found it very stimulating and challenging, have learned a great deal and now feel that I can contribute more to the performance of my store," says Mrs Bhunnoo.

Coming Events

YPG challenge

The eighth annual conference of the Young Pharmacists Group entitled "Challenging Our Profession" will be held at the Moat House Hotel, Cardiff, on October 29-30.

New to the conference this year is an Oxford Union-style debate between John Merrills, deputy chief pharmacist at the Department of Health, and David Sharpe, chairman of the Pharmaceutical Services Negotiating Committee, on whether patient registration within community pharmacy will improve the quality of pharmaceutical services for the nation.

The conference will include Question Time and motions for

debate. Speakers include Kim Howells MP, member of the Public Accounts Committee, and Michael Jenkins, FHSA general manager.

Booking forms can be obtained from Sarah Braybrook at **Gwent FHSA, tel: 0495 750831.**

Psychiatric conference

The Psychiatric Pharmacy Group is holding its 18th annual conference on September 29 to October 1 at the University of York.

The PPG is keen to get community pharmacists involved as they now face the challenge of providing services for people with

long-term mental health problems under the care in the community programme.

The full conference fee is £190 which includes registration, accommodation and meals. Day attendance fee is £40 which includes lunch. For details phone: 0943 876681.

Monday, September 6

Southampton Branch RPSGB 'Danger in the Shrubbery' by Dr P J Houghton at 7.30pm for 8pm at The Abbey Hotel, Romsey. Contact Mr Bland, branch secretary on 0703 261077

Advance information

Vichy product training evening at the Onslow Hotel, Queensgate, South Kensington, London, on **September 8**, 7pm to 9.30pm. Free for pharmacist stockists in the London

area. For an invitation contact Angela Couling on 0235 526747.

Industrial Pharmacists Group one-day meeting on 'Validation' on **September 9** at 1 Lambeth High Street, London SE1.

The Colmar Symposium for Biological Sciences in Colmar, France, on **September 9-10**. Further details, tel: (33) 89 22 66 66.

Three Pears Wholesale Trade Show at Warley, West Midlands, **September 15**. For details, tel: 021-559 5351.

National Association of Health Authorities and Trusts conference on 'The NHS and the private healthcare sector' on **September 21** at the Queen Elizabeth II Conference Centre, Westminster, London. Contact NAHAT office, tel: 021-414 1381.

The Society for Drug Research 'Neuroendocrinimmunology' meeting at the Charing Cross and Westminster Medical School, London W6, on **September 23**. Further details from the Society, tel: 071-581 8333.

Don't dice with lice

“Insect populations that are indefinitely exposed to a single insecticide inevitably develop resistance.”



INDICATIONS: DERBAC-C Liquid, DERBAC-M Liquid, FULL MARKS Lotion and FULL MARKS Lotion. **Ingredients:** DERBAC-C Liquid: 1.0% w/w. CARYLDERM: carbaryl 0.5% w/v. PRIODERM: malathion 0.5% w/v. DERBAC-M: malathion 0.5% w/v. FULL MARKS Lotion: phenothrin 0.2% w/v. **Administration:** Sprinkle on hair and rub gently into the scalp until all the hair and scalp are thoroughly moistened. Allow the hair to dry naturally and leave for at least 2 hours for DERBAC-C Liquid and DERBAC-M Liquid. Shampoo the hair normally. Rinse and comb whilst hair is wet to remove dead lice and eggs.

Contraindications, warnings, etc.: Not to be used on infants under 6 months of age. Avoid use on medical advice. Avoid use with the eyes. Skin irritation can occur. These treatments may affect the hair, especially if it is coloured or bleached hair. Do not use these products if you are allergic to any of the active ingredients. Do not use on infants under 6 months of age. Do not use on medical advice. Avoid use with the eyes. Skin irritation can occur. These treatments may affect the hair, especially if it is coloured or bleached hair. Do not use these products if you are allergic to any of the active ingredients.

Licence numbers: DERBAC-C Liquid PL 0337/0038, DERBAC-M Liquid PL 0337/0203, FULL MARKS Lotion PL 0337/0153, PRIODERM Lotion PL 0199/5002R. **Licence holders:** Napp Laboratories Ltd, Cambridge Science Park, Milton Road, Cambridge CB4 4GW. (CARYLDERM Lotion, DERBAC-C and DERBAC-M Liquid, FULL MARKS Lotion). Phory Ltd, (Member of Napp Laboratories Group), Cambridge Science Park, Milton Road, Cambridge CB4 4GW. **Preparation:** June 1993. **Information is available on:** Napp Laboratories Limited, Cambridge Science Park, Milton Road, Cambridge CB4 4GW. **Registered Trade Marks:** Napp Laboratories Limited, 1993.

To help prevent resistance development FOLLOW THE ROTATIONAL POLICY

as recommended by your Regional/District Pharmaceutical Officer
Napp Consumer Products Division have a full range of products to fulfil all requirements of the rotational policy

pyrethroids
(phenothrin)



malathion



carbaryl



“Any incipient resistance which may have developed can then be eliminated by the discontinuance of the first insecticide and the substitution of another for the next three years.”

To find out which product is on rotation in your area, please contact your Regional/District Pharmaceutical Officer or ring the
HEADLICE HELPLINE ON 0223 424444



Consumer Products Division, Napp Laboratories Limited, Cambridge Science Park, Milton Road, Cambridge CB4 4GW. Date of Preparation: February, 1993.

BRITISH PHARMACIES MAKE £7,000,000 A YEAR PROFIT ON NUROFEN.



WHAT'S YOUR CUT?

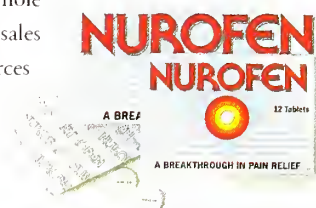
Obviously, the more Nurofen you sell, the more cash profit you'll get. To make sure your sales keep growing, we invest over £5 million every year in advertising Nurofen to your customers.

But TV and press advertising is only a part of it. Nurofen is also supported by an extensive public relations effort, a whole range of point-of-sale and educational materials, sales incentives – in short, by the entire resources of a major healthcare company, totally dedicated to your success.



So it's not surprising Nurofen, already the No.1 pharmacy analgesic, keeps growing each year.

Since your customers know they can rely on Nurofen to relieve a common OTC pain indications, there's no reason why it can't do even better. In fact, with your continued support, we know it will continue to grow. As will your share of Nurofen's success.



**When it's time to recommend,
there's nothing quite like it.**

NUROFEN 1983-1993 TEN UNRIVALLED YEARS